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AUTHOR Shull, Jan

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ABSTRACT

This manual is designed to assist agencies in the development of a child care manual that will serve as an orientation tool for the new child care worker, and as an on-going reference tool. The manual is organized to orient the child care worker first to the agency objectives, functions, and organization, and then to specific child care responsibilities. Emergency procedures and the crucial issue of abuse and neglect are presented early and in separate sections. The remainder of the manual addresses services to the child and management of household and daily routines. Space is provided for the agency to insert sample copies of all agency forms with which the child care worker needs to be familiar. Finally, the manual includes a resources section, providing an introduction to reading materials for the ongoing professional development of the child care worker. Each section of the manual includes an introductory statement of the significance of that specific area of discussion, including a statement of child care philosophy. These statements are enclosed in a box to highlight the content. The remainder of each section provides an outline of the policies and procedures which need to be addressed in order for the child care worker to carry out responsibilities in that area. (LLL)

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MODEL MANUAL

FOR THE

CHILD CARE WORKER

by

Jan Shull
Department of Social Work

Social Research and Service Center
College of Sciences and Humanities
Ball State University
Muncie, Indiana 47306
1983

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PROJECT STAFF

Project Director	Ann L. Brown
Project Associate	Jan Shull

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INTRODUCTION

The child care worker in a residential child care agency occupies a central place, both in the life of the child in care and in the life of the agency. The term child care is so clear and simple and tells us so much, yet it cannot begin to express all that we expect of the child care worker. Jake Terpstra, residential child care specialist of the U. S. Children's Bureau, developed the following description of the spoken and unspoken expectations we carry for child care staff:[1]

> We want a humble paragon, who is firm, fair, kind, warm, understanding, goal directed, can understand instructions, administer first aid, write reports, drive a car, help kids with homework and shopping, and can keep calm.
>
> We also expect the child care worker to be:
> sympathetic, but objective;
> loyal, yet creative;
> a complete individual, yet able to work as a team;
> light hearted, with humor, but willing to take the job seriously;
> old enough to be wise, but young enough to be energetic;
> old enough to be free of family responsibility, yet young enough to be healthy;
> able to maintain control, yet non-competitive or domineering;
> a good listener, and not preachy;
> clean, yet willing to get both hands dirty;
> of good moral character, but shocked at nothing.

Although it is not possible to develop a job description that could fully express all that we expect of the child care worker, it is possible to describe what we mean by child care. It is the purpose of this manual to assist agencies to do just that--to provide a clear and detailed description of the specific responsibilities of the child care worker and to help the child care worker to understand the agency and his/her role within the agency.

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[1]Jake Terpstra, Children's Bureau, Administration of Children, Youth, and Families, Department of Health and Human Services, Washington, D.C.

Child care begins with the physcial aspects: safety, health, proper shelter and food, recreation, and stimulation. Providing for the safety, protection, and health of children applies both to the physical environment and to the emotional and mental aspects of a child's environment. Child care includes providing the child with a niche that allows the child to know he/she belongs. Child care means caring. It means providing nurturance in every sense of the word, including feeding and the essential emotional nurturance of kindness, acceptance, and recognition. Child care involves providing guidance, control, and reasonable limitations, carried out in a kind but firm manner.

There are several things that child care is not. Child care is not parenting, and the child care worker never replaces the child's parent. The child care worker is not a therapist, teacher, nurse, social worker, or maintenance worker, although the child care worker does perform some of the functions of each. The child care worker does monitor health carefully, striving to prevent injury and illness, referring for medical care when necessary, and sometimes giving first aid. The child care worker is involved in future planning for the child in relation to the family and is usually the first to know the contents of a letter from home or what occurred on a home visit. The child care worker is called upon to handle on-the-spot interviews about behavior, attitudes, depressions, and fears. While the child care worker is not the educator, all that is done to guide the child is intimately related to learning and teaching. Maintenance is an ongoing and daily chore in a children's institution. The child care worker supervises housekeeping and handles all aspects of preventive maintenance.[1]

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[1]Klein, Alan F. The Professional Child Care Worker. pp. 23-27.

Use of the Model to Develop Agency's Own Child Care Manual

The purpose of this manual is to provide a guide to the agency for the development of a child care manual that is specific to that agency. The manual will serve both as an orientation tool for the new child care worker and as an ongoing reference that may be used throughout the worker's practice.

The manual is organized to orient the child care worker first to the agency objectives, functions, and organization, and then to specific child care responsibilities. Emergency procedures and the crucial issue of abuse and neglect are presented early and in separate sections. These are essential areas in which the child care worker must be clearly informed, before taking any responsibility for the care of children. The remainder of the manual addresses, in detail, services to the child and management of household and daily routines. Space is provided for the agency to insert sample copies of all agency forms with which the child care worker needs to be familiar. Finally, the manual includes a resources section, providing an introduction to reading materials for the ongoing professional development of the child care worker. This section may also serve as a guide to the agency in developing an agency library that is relevant to the child care worker.

Each section of the manual includes an introductory statement of the significance of that specific area of discussion, including a statement of child care philosophy. These statements are enclosed in a box to highlight the content. The material may be used in this form in the agency's manual.

The remainder of each section provides an outline of the policies and procedures which need to be addressed in order for the child care worker to carry out responsibilities in that area.

The manual is presented in a looseleaf format, with index tabs for easy access to any subject. This format allows the agency to easily revise and update the manual as needed. It is suggested that policy and procedural material in the manual be dated, so that revisions can be clearly identified.

The process of developing an agency-specific child care manual will involve three steps, drawing on three primary sources of materials:

Step 1: Pulling together of materials already in use in the agency. Most agencies will find that the bulk of the material needed to prepare a child care manual has already been developed and is in use within the agency. The written policies and procedures required for licensure and the many written policies and procedures developed to carry out the agency's day-to-day functions can, in many cases, be directly inserted in the manual or can be readily adapted to the format of the child care manual.

Step 2: Enlisting the child care workers within the agency to write procedures. The child care workers within the agency possess a wealth of knowledge about procedures that may never have been put in writing, but have been practiced and tested and found to work effectively in the agency. Each section provides an outline and specific questions to be answered about the agency procedures. With this guide, child care workers will be able to write agency procedures.

Step 3. Identifying gaps in agency policies and procedures and developing written materials to fill those gaps. Through the process of developing the child care manual, the agency is likely to identify gaps or areas where policies and procedures have not been clarified and put in writing. There are many excellent resources to assist the agency in developing materials to fill those gaps. The Indiana State Department of Public Welfare provides consultation to all licensed residential child care facilities and has developed, in addition

to the Rules and Regulations for Licensure, written guidelines in several specific areas, including child abuse and discipline. The Indiana State Board of Health also provides consultation to licensed child care facilities in the areas of health care and food services. The Indiana Association of Residential Child Care Agencies provides consultation to child care agencies within Indiana and has developed files of policies and procedures which have been shared by member agencies and are available for the use of any agency requesting them. In addition, various printed materials used to prepare this manual are listed in the reference section at the end and are available through the Department of Health and Human Services, the Child Welfare League of America, as well as other publishers. Particularly valuable resources are provided in the Residential Child Care Guidebook and the Residential Child Care Sourcebook developed by the Interstate Consortium on Residential Child Care, Department of Human Services, Capital Place One, Trenton, New Jersey, 08625. The Guidebook presents model standards for residential child care, and is available free of charge upon request. The Sourcebook provides a simple step-by-step guide to policy development and is designed to give direct, practical assistance in designing forms, policies and procedures which reflect the realities of the individual agency's program. There is a charge for the Sourcebook to cover printing and mailing.

ORIENTATION TO THE AGENCY

A. HISTORY ANT OBJECTIVES OF THE AGENCY

Every residential child care facility has an identity of its own and was established to achieve a definite purpose and to provide specific services. Some child care facilities are part of a larger organization and others operate independently. In order for staff to understand the workings of the total program, all agency staff need not only an orientation to the administrative and program procedures, but also a clear understanding of the objectives of the agency and some knowledge of its history. The child care worker with a clear understanding of these areas will not only be more effective in carrying out his/her role and responsibilities in the agency, but will also feel more closely identified with the agency and be able to represent the agency effectively within the community.

The questions that may be answered by this section of the orientation manual include:

1. Agency philosophy and program objectives. What is the agency philosophy and what are the objectives of the program?
2. Services. What services are provided (e.g. group living, education, social services, services to families, health care, recreation, religion)?
3. Children served. What are the characteristics of the children served by the program? Why are they placed in residential care?
4. Numbers of children and length of stay. How many children are served, and what is their average length of stay?
5. Referral. How are children referred to the program, and by whom? Who holds legal responsibility for the children?
6. Establishment of agency. When was the agency established, and by whom?
7. Funding. How is the agency funded? What is the cost of care for a child?

8. Service changes. What changes have taken place in the agency objectives or services since its establishment?

9. Licensure or certification. By whom is the agency licensed, certified or accredited? Staff need to understand that regulations and standards for licensing or certification are a means by which quality care can be assured for all children in residential group care facilities.

B. AGENCY ORGANIZATION

The child care worker does not work with children in a vacuum, but rather works as a part of a complex and purposeful system of policies, program, and administrative procedures designed to meet the needs of children in care. In order to carry out agency policies in the service of children, the child care worker needs not only a knowledge and understanding of agency policies, but also some background about how the agency's policies are established. The child care worker needs, further, to understand the administrative structure and lines of authority developed within the agency to carry out those policies. Each staff member must have a clearly defined role and clear responsibilities and an understanding of the roles and responsibilities of other staff. The better the child care worker knows his/her own function and how it is different from the functions of others, the more helpful the child care worker will be. It is the awareness of being part of a team which enables the child care worker to contribute effectively to the service of each child and to the overall agency program and to turn to other staff for information, support and help with problems on the job. An effective network of communications among staff is essential to quality child care.

This section of the orientation manual outlines for staff how and by whom agency policies are established, what are the specific roles and responsibilities of each staff position, and what provisions are made for communication among staff.

1. How agency policy is established. If the agency is governed by a Board of Directors, staff need to know the responsibilities of that Board. If the agency is government operated, include an explanation of which branch of government operates the agency and whether there is an advisory board.

An agency Organization Chart may be included here to more clearly define the lines of authority within the agency.

2. Staff communications. In order to provide continuity in the services to children, the residential child care agency must establish procedures to assure adequate communication among staff. Besides providing quality services to the children in care, effective staff communication also provides opportunities for much needed support among staff members. This section should include:

   a. provisions for staff or team meetings;

   b. how the child care worker participates in agency program planning;

   c. how the child care worker gains information about children in care and the individual service plans for each child, what information will be provided by other staff, and to whom the child care worker can turn for specific information;

   d. how information is shared among child care workers on duty together or between those changing shifts;

   e. what specific information needs to be communicated to supervisors, social workers, or other staff;

   f. what written communications are to be completed by child care staff (e.g. daily logs, incident reports).

3. Staff roles and responsibilities. Child care workers need to have not only a clear understanding of their own role and responsibilities, but also of the roles and responsibilities of other staff within the agency. A detailed description of a child care worker's responsibilities should include specific responsibilities in the care of children, household management, transportation of residents, written recording or logging responsibilities, and responsibilities for communicating with other staff and participating in staff team meetings. In those agencies in which there is a distinction between "regular" child care workers and relief, assistant, or associate child care workers, the differences in their roles and responsibilities need to be clarified. Job descriptions should be included for all other staff with whom the child care worker will come in contact. Staff positions will vary greatly from agency to agency, but may include:

   Administrator
   Child Care Supervisor
   Social Worker or Counselor
   Teacher or Tutor
   Recreation or Activities Leader
   Clerical Staff
   Housekeeper, cook, or maintenance person

4. External professional services. The agency may also obtain from professionals in the community direct services to children in residence or consultation to staff. The roles of these external professionals are included in this section.

5. Volunteers. In addition to regular staff positions, agencies may make use of volunteers in a variety of roles. Child care workers, who are likely to come into frequent contact with those volunteers, need to understand what roles the volunteers will carry out, how they are selected and oriented to the agency, and by whom they are supervised. More specifically, the child care worker needs to know what his/her role is with the volunteer and what kinds of information are appropriately shared with the volunteer.

6. Students and interns. If the agency participates in the training of students or interns, include a statement of the purpose of the student's involvement with the agency and the student's role and responsibilities. Staff also need to know who is directly responsible for the supervision of students.

C. PERSONNEL POLICIES AND PROCEDURES

The residential child care agency's most important resource is its personnel. To build and maintain a capable staff requires time, experience, money, and continuous effort. To attract and hold mature, effective people, working conditions must include adequate compensation, a high quality and challenging child care program, clear assignments and delegation of responsibility, good supervision and communications, and an effective in-service training program.

The Rules and Regulations of the Indiana State Department of Public Welfare for the licensing of children's homes require that each agency establish and follow written policies regarding employment, compensation, and terms and conditions of work. It is further required that the statement of personnel policies be in written form and be made available and known to each employee at the time of employment. For the agencies which have a separate manual of personnel policies and procedures, this section may be omitted from the manual for child care workers. Agencies have considerable latitude in developing personnel policies, but are required to develop written policies regarding:[1]

1. Salary ranges;
2. Employment benefits including board and room, retirement plan, social security, hospitalization and other insurance;
3. The time and method of staff rating or evaluation;
4. Any provisions established for merit increases;

[1]Indiana State Department of Public Welfare. Rules and Regulations, Regulation 3-309, Personnel Policies.

5. Hours of work, including time off duty and rest periods, and compensatory time off for overtime and unusual demands;

6. Sick leave, vacation, holidays;

7. Termination of employment;

8. Provisions for in-service training and supervision.

In addition, the following areas may be addressed in the agency's personnel policies:

1. Employee health records--required health examination and immunization records;

2. Personnel files--what the file contains and how the employee may gain access to the file;

3. Release of information--agency policy regarding release of information as reference material regarding employees;

4. Grievance procedures for employees;

5. Living quarters for staff--a description of quarters provided and any agency guidelines for maintaining those quarters;

6. Procedures involving employee's personal mail, use of agency telephones, personal possessions, and automobiles.

7. Statement of staff rights. As increased emphasis is placed upon the rights of children in care and the rights of their families, attention needs to be paid to the rights of staff in child care agencies. One agency developed the following statement of the rights assigned to any staff person having responsibility for disciplining children.[1]

Staff have the right:

a. to respect;
b. to humane treatment;
c. to freedom from harassment;
d. to access to the court system, i.e. to press charges against a child for bodily harm or slander;
e. to obtain legal counsel;
f. to restrain the youth in order to protect self or others;
g. to immediate notification of allegations;
h. to prompt investigation and knowledge of the findings;
i. to supervisory and administrative support which includes being considered innocent until proven guilty, i.e., the investigation of charges prior to a court filing;

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[1]Ohio Association of Child Caring Agencies. Guidelines for Protecting the Child in Residential Group Care. p. A-23.

j. to have false charges retracted in writing (name cleared) and a copy of the abuse registration form upon request;
k. to staff development to provide knowledge on child management and restraint.

8. Statement of professional conduct, which may include:

a. standards for personal appearance, grooming or dress;
b. alcoholic beverages and illegal drugs;
c. smoking--specify areas within the agency where smoking is and is not permitted;
d. family of staff--agency guidelines for staff who carry responsibilities for their own families while on duty, and agency guidelines addressing the privileges of staff to have family members visit while on duty;
e. cohabitation of unmarried agency staff on agency premises;
f. guidelines for personal use of agency property (e.g., vehicles, recreation space or equipment);
g. Confidentiality. All staff are obligated to safeguard information about a child and his/her family that has been obtained in the course of professional practice. Such information may only be shared with others who are involved with the child and family on a professional basis. In addition, such information must be shared in a professional manner and only when it serves the best interest of the child. Staff must especially be alert to careless conversation in the presence of other children and the sharing of confidential information about children or about the agency within the community.

EMERGENCY PROCEDURES AND SAFETY PRACTICES

A. EMERGENCY PROCEDURES

It goes without saying that providing for the safety of all children in residential care is of paramount importance. Besides the caring aspect, the child care agency has a legal responsibility for the safety of children in care. Every staff member in the agency must accept full responsibility in this area. It is essential that child care staff be instructed in emergency procedures before taking any responsibility for children. Emergency procedures must be conspicuously posted in all buildings of the child care facility.

Emergency procedures must clearly and briefly address several areas:

1. Definition of emergencies. Many different circumstances in child care constitute an emergency. These include, but are not limited to:

   Fire

   Disaster--Civil or Natural (e.g., Tornado, Flood)

   Medical Emergency--Physical Injury, Severe Illness, Suicide Attempt, Drug Ingestion.

   Major Behavioral Disturbance--Staff unable to restrain or control the behavior of a child or group of children, constituting danger to children, staff, or property.

   Runaway

   Criminal Activity--Vandalism or Unlawful Entry.

   Personal Emergency for Child Care Worker.

2. Procedures. Procedures will vary according to the nature of the emergency and will most often require a separate Fire Plan, Disaster Plan, etc. These plans should be developed in consultation with appropriate experts, such as the fire marshal, the local civil defense office or the agency physician. Procedures should address the following issues:

   a. Evacuation. The first responsibility of staff in case of fire is the evacuation of all children without regard for property. In the case of disaster this may require movement of children to a designated safer place.

b. Emergency phone numbers. Emergency phone numbers should be posted next to telephone, and should include at least:

Fire

Police

Ambulance

Physician

Hospital

Poison Control

c. On-call staff. The on-call rotation of administrative staff must be clearly stated, including office and home phone numbers, or paging ("beeper") instructions, for all staff who carry responsibility for emergencies.

d. Supervision of children. Provisions must be clarified for arranging for the supervision of the remainder of the group of children, if a staff member is required to provide emergency medical services, transport a child, or if the staff member has a personal emergency.

3. Incident Reports. Immediately following any emergency, accident, or other critical incident, the responsible staff person should complete a written incident report. The incident report serves the following functions:

a. Provides an efficient means of inter-staff communication of incidents;

b. Serves as a means of record keeping involving individual children;

c. Provides information in the event an incident with a child should become a matter of investigation;

d. Provides information and statistics which contribute to the evaluation of the agency's program and the establishment of agency policies and procedures.

The following areas should be addressed in the incident report:

a. Date/Time of incident

b. Location

c. Children involved

d. Staff involved

e. Others involved

f. Description of incident and events leading to incident

g. Immediate measures taken

h. Description of any injuries sustained

i. Description of any medical care obtained

A routing procedure must be established so that appropriate staff are informed of the incident and may take necessary action. Provisions must also be made for the filing of the report in all appropriate agency files.

B. SAFETY PRACTICES

As in the case of emergencies, every staff member in the agency must accept full responsibility for the prevention of accidents and injuries and for the detection and removal of any safety hazards. While concern for safety should not cause staff to unduly restrict or interfere with normal childhood activities, more than usual care must be taken. Besides the prevention of hazards within the environment, the child care worker is responsible for the close supervision of children to prevent accidents in the day-to-day activities of showering, doing household chores, playing, and going to and from school and other activities. The child care worker must also supervise closely to protect children from accidental or intentional injury or abuse by other children.

Safety practices within the agency should address at least the following issues:[1]

1. Fire extinguishers. Staff must know the location of fire extinguishers in all buildings. What is the procedure and whose is the responsibility to make monthly checks on the pressure of fire extinguishers and the functioning of smoke detectors?

2. Fire drills. What is the agency procedure for quarterly fire drills and the instruction of staff and children in fire prevention?

3. Disaster drills. What are the agency procedures for periodic disaster drills?

4. Fire hazards. The institution must be kept free from fire hazards; combustible materials such as paper, rags and excelsior must not be permitted to accumulate upon the premises. No materials are to be stored under stairwells.

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[1]For specific licensing regulations see:

Indiana State Department of Public Welfare. Rules and Regulations, Regulations 3-368, 3-369 and 3-370.

5. Exits. Staff and children must know locations of all exits. There must be no less than two (2) exits from each floor, and doors must be maintained so as to be useable at all hours. Exits must be lighted and must be kept free from obstruction at all times.

6. Flammable liquids. All flammable liquids must be kept in tight or sealed containers when not in use, and may be stored only in such quantities and in such rooms as are approved by the state fire marshal, and must be inaccessible to children.

7. Children handling flammables. Children should not be allowed to handle flammable or combustible materials, use matches, or tend fires, except with close staff supervision.

8. Smoking. State the specific areas on the premises that are designated for smoking and the procedures for supervision, if children are permitted to smoke.

9. Storage of toxic and hazardous materials. Materials containing poisons, drugs and other harmful chemicals must be kept under lock and key, and in a place inaccessible to children. Hazardous articles, materials, and equipment, such as cleaning fluids, polishes, bleaches, detergents, matches, firearms and tools must be kept in a place inaccessible to children, must be distinctly labeled for easy identification of contents, and must be stored in such a way as to not contaminate food.

10. Power-driven equipment. Power-driven equipment must be kept in safe operating condition. Such equipment must be used by children only under the direct supervision of a staff member and according to state law.

11. Swimming pools. All swimming pools must conform to state and local health and safety regulations. Adult supervision must be provided at all times when children are using the pool. Most agencies require supervision by persons trained in water safety. State the specific agency procedures for the supervision of children at swimming pools.

12. Bodies of water. Adequate safety measures must be taken regarding fishing ponds, lakes, or any bodies of water located on or near the institution grounds and accessible to children.

13. Supervision. State any additional specific agency guidelines for supervision of children on agency grounds or on agency-sponsored activities off-grounds.

Child abuse and neglect are recognized as a serious threat to the lives of today's children and tomorrow's adults. They can cause death and permanent physical injury and serious damage to the child's personality. Child abuse and neglect are of concern to the providers of residential child care, both because many of the children who require residential care have been victims, and because child abuse and neglect do happen in child caring institutions. The abuse and neglect of children in institutions is a concern of everyone: the general public, parents, placing agencies, child care institution staff, and, most of all, the children in care.

Much recent effort has been made by legislators, state regulating agencies and providers of residential child care, to find effective methods to prevent, reduce and eliminate institutional abuse and neglect. The Juvenile Code of the State of Indiana provides strong legislation, mandating the reporting and investigation of all suspected abuse and neglect. In response to this legislation and to an increased awareness of the problem, child care institutions are taking important steps to prevent, reduce and eliminate abuse and neglect. Among the most significant steps is the development of written policies, which clearly define child abuse and neglect, inform staff of their duty to report, explain investigation procedures, and set clear standards for discipline. A major obstacle in dealing with maltreatment of children in child care institutions has been the lack of clear definitions about what constitutes abuse and neglect. Because society places much more rigid standards on its institutions than it does on its families, the definition of institutional maltreatment is much broader than the usual definition of child abuse and neglect. The definition of institutional abuse and neglect encompasses not only grave and criminal

physical abuse and neglect, but also emotional neglect and even forms of care and treatment which, though possibly not damaging, are less than optimal.

In addition to written policies, prevention of abuse and neglect has focused on the proper screening, training, supervision and support of child care staff.

> "As a rule of thumb, we might say that, within a residential facility, staff members generally tend to treat the children the way the facility treats them [staff]. Institutional abuse and neglect are caused by the same kinds of tensions and pressures which cause parents to abuse and neglect children. Isolation is, without doubt, a major factor. If the staff member feels little or no support from others within the facility, abuse or neglect is much more likely. Caring for children in a residential setting, particularly difficult children, is a high pressure job. Sooner or later every direct service worker experiences a moment of intense anger and frustration and a desire to lash out at the child who has triggered these feelings. . . Staff members must not be compelled to work excessively long hours with the children. An overworked direct service worker, teetering on the brink of 'burn-out,' is far more likely to lose control or perform his/her tasks poorly."[1]

Besides the risk of abuse or neglect by institutional staff, child care workers must be alert to the risks of abuse of residents by persons outside the institution. Children may be abused while on leave from the institution, whether on a visit with relatives or on a runaway. If there is any reason to suspect abuse, children may be examined and questioned, and the suspected abuse must be reported. This serves as protection both for the child and for institutional staff who might later be held responsible for injuries the child has sustained.

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[1]Interstate Consortium. Guidebook, pp. 85-86.

A. DEFINITION OF ABUSE AND NEGLECT

1. Institutional child abuse--when a child who is cared for by any public or private child-caring facility is injured (includes injuries from bruises through broken bones) by the staff or anyone representing the facility, whether on institutional grounds or away from the facility. If the child is injured, it is defined as abuse whether it is an overt act or an omission by staff. Injury caused by the unintentional use of excessive force or improper restraint is defined as abuse.
2. Institutional sexual abuse--when the staff of a public or private child-caring facility perform or submit to sexual intercourse, deviate sexual conduct, fondling, or exploitation of a child who is cared for by the facility. Unlike other types of abuse, institutional sexual abuse need not be perpetrated by the caretaker, but may be perpetrated by another child, depending upon the age of the child and whether force was used.
3. Institutional neglect--when the staff of the facility fail to provide a child with necessary food, clothing, shelter, medical care, education, or supervision, or when a child is injured because staff fail to provide appropriate supervision.
4. Emotional abuse--includes humiliation, harrassment, or bizarre behaviors.
5. Emotional neglect--involves gross failure to provide for a child's emotional needs.
6. Physical, sexual, and emotional abuse and neglect--which take place out-side the child-caring facility and are perpetrated by persons other than facility staff do not constitute institutional abuse and neglect. However, they do constitute child abuse and neglect and must be reported by institutional staff, if suspected.

B. REPORTING RESPONSIBILITY AND PROCEDURES

The Juvenile Code of the State of Indiana requires that any person who suspects that a child is a victim of abuse or neglect shall report it immediately.

Institutional Abuse and Neglect[1]

TO REPORT, CALL: Indiana State Child Protection Service

1-800-562-2407

To report institutional child abuse or neglect or to clarify any questions regarding the subject, this toll-free, 24-hour Hot Line is to be called day or night. If a report is made weekdays between the hours of 4:45 p.m. and 8:15 a.m. or on weekends or holidays, the caller is asked to leave a name and a telephone number where the caller can be reached for further information if necessary. It should be noted, however, that calls received from persons who wish to remain anonymous are also accepted. The Indiana State Child Protection Service recommends that each institution develop its own protocol for the reporting of suspected institutional abuse, designating a staff member who receives reports and is responsible for reporting to the Child Protection Service. Staff must be aware, however, that their responsibility to report does not end if the designated staff member fails to make a report.

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[1]The Indiana State Department of Public Welfare has prepared a one-page Institutional Child Abuse and Neglect Fact Sheet, which is directed to all employees of child caring facilities and is recommended for posting and to be given to staff. That Fact Sheet may be inserted in this section of the agency's child care manual.

The information required in making the report should include, if available:

time and date that the report is received;
name, title, address, agency affiliation and telephone number of the caller;
name, birth date or age and current location of child alleged to have been abused/neglected;
name and address of agency, court, parent or other person legally responsible for the child, if known;
name of the facility, location, telephone number and setting in which the abuse/neglect allegedly occurred and when it occurred;
name and address of the alleged perpetrator, current location and his position at the institution;
specific complaint information;
name of the person receiving the report.

Abuse and Neglect Outside the Institution

TO REPORT, CALL: County Child Protection Services

(Insert Phone Number)

When a staff member suspects that a child in care has been abused by a person who is not a part of the institution, this must also be reported. If the agency has designated a staff member to receive and make reports, the suspicion should be reported to the designated staff member. A report is then made to the Child Protection Service of the county in which the abuse occurred. In addition, a report is made to the agency which placed the child in the institution.

C. INVESTIGATION

If appropriate, an investigation of the situation may be conducted immediately or on the next working day, depending on the seriousness of the report. The Indiana State Department of Public Welfare investigates reports involving state operated and residential child-care facilities. Local County Departments of Public Welfare investigate other reports of abuse and neglect. The investigation may include interviews, photographs, a review of pertinent records and reports, etc. When the investigation is completed and reviewed, a letter marked "Confidential" is sent to the administrator of the agency being investigated. The letter includes the findings of the investigation and any recommendations for corrective action. If the report of abuse or neglect is substantiated and subject to criminal charges, the case is referred to the prosecutor. If the report is undetermined or unsubstantiated, all records of the investigation are expunged.

D. AGENCY ABUSE AND NEGLECT POLICY

The Indiana State Department of Public Welfare encourages residential child-caring institutions to develop their own written policies and procedures for the prevention of abuse and neglect and for the handling of suspected incidents of abuse or neglect.[1]

This policy may include:

1. Discipline and control policies. A statement of the range of allowable sanctions; a statement of agency policy regarding corporal punishment; guidelines for the use of physical restraint; and a specific listing of staff actions that are prohibited by the agency.

2. Recognition of abuse and neglect. Instructions for staff on the recognition of abuse and neglect.

3. Reporting responsibilities. A statement of the reporting responsibilities of all staff.

4. Internal reporting and investigation procedures. These may include:

   a. designation of a staff person to whom reports are made;

   b. a system for maintaining written records of reports and investigations;

   c. a procedure to protect the child from further abuse;

   d. a procedure for the investigation of the alleged incident.

5. Disciplinary action. The agency should develop a statement of possible disciplinary actions that may be taken against a staff member if an incident is substantiated.

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[1]The following resources are available to assist the institutions in developing written abuse and neglect policies:

Harrell, S.A. and Orem, R.C. Preventing Child Abuse and Neglect: A Guide for Staff in Residential Institutions.

Indiana State Department of Public Welfare. Protocol for Investigating Institutional Abuse/Neglect Allegations. November, 1982.

Interstate Consortium. Guidebook and Sourcebook.

Navarre, E.L. Sexually Abused Children--Prevention, Protection, and Care: A Handbook for Residential Child Care Facilities.

Ohio Association of Child Caring Agencies. Guidelines for Protecting the Child in Residential Group Care.

SERVICES TO THE CHILD

A. TREATMENT PLANNING AND REVIEW

Children are placed in residential child care agencies because they have problems that cannot be dealt with in the home or in another setting and because they have specific needs that can best be met by the particular agency where they are placed. The goal of placement is to help the child grow and develop in accordance with his or her potential and to gradually move toward increased maturity, self-direction, self-discipline, and independance. The overall goal is to prepare the child for life outside the institution or group home and to provide permanency in the child's life. To attain this goal the agency formulates a plan for the treatment of each child in placement. The treatment plan is a written commitment to provide specific services to meet the individual needs of the child and to achieve clearly stated long-range and short-range goals for the child.

The Indiana State Department of Public Welfare Rules and Regulations and the Social Services Fiscal Office Certification Standards for Group and Residential Treatment Services require that residential child care agencies develop an individual plan for the care and treatment of each child and that the plan be reviewed at least every six months by all staff directly involved with the child. Social Services Fiscal Office Certification Standards further require that the treatment plan include a plan for the child's discharge. The treatment plan is generally developed within thirty days of the child's admission.

Treatment planning and review process.

Child care workers need to understand the steps in the treatment planning process and to know specifically their role and responsibilities, both in the initial treatment planning and in the periodic treatment reviews. The child care worker in day-to-day interactions with the child, is in a unique position to contribute to assessing the child's needs and strengths and to defining, in very specific terms, the child's problems. In addition, the child care worker is involved, perhaps more intimately than any other professional, in carrying out the plan and in assessing the gains that are being made toward reaching specific goals. It is in the child's everyday activities and interactions that life skills are practiced and appropriate behaviors are learned and used.

The treatment planning process, though it varies from one agency to another, involves the following people:

1. the child;
2. the child's family;
3. the staff of the residential child care agency, including all staff who work directly with the child;
4. the placing agency representative;
5. the representative of any other agency involved with the child.

Components of the treatment plan. To be effective, the treatment plan for each child should include at least the following components:

1. Assessment--an assessment of the child's needs and strengths and a statement of the reason for placement;

2. Long-range goals--a statement of the long-range goals for the child and family;

3. Short-range goals--a listing of short-range goals which are stated in terms of specific behaviors which will lead to the achievement of long-range goals. Such specific goals may include an agreed-upon time-frame or projected deadline for accomplishing each goal;

4. Services provided by the agency--a statement of services to be provided by the residential child care agency to:

   a. the child, in the areas of:
      personal development;
      social development--group living;
      family relationships;
      health care;
      education and/or vocational training;
      life skills development;
      recreation;

   b. the child's family, in the areas of;
      communication about child in care;
      visits with child;
      services to strengthen and restore family relationships;
      If the child's family is not to be involved in the child's treatment a clear statement of the reasons for this decision should be made here.

   c. the placing agency, including:
      periodic reports of the child's progress;
      notification of major medical needs;
      notification of any changes in the treatment plan.

5. Responsibilities of the child--should be closely related to long-range and short-range goals and to services provided by the agency;

6. Responsibilities of the family--also closely related to long-range and short-range goals and to services provided by the agency to the family;

7. Responsibilities of the placing agency--participation in treatment planning and discharge planning;

8. Discharge plan--a preliminary plan for the child's discharge from the agency and move toward a permanent home in the community;

9. Review plan--a plan and schedule for periodic reviews of the treatment plan;

10. Signatures--a space for the signatures of all participants in the treatment plan.

B. CHILD MANAGEMENT

When caring for children with problems, a significant part of an adult's attention and energy is focused on managing behavior and teaching discipline.

The child care worker is in a special position to help children recognize and change self-defeating behaviors and learn constructive ways to get what they need and want, while honoring the rights and needs of others. This is, however, a gradual process in which children learn to set limits on their own behavior. This takes place through the very active involvement of the child care worker in providing supervision, limits, controls, and clear expectations for children's behavior. In addition, the child care worker dispenses rewards for appropriate behaviors and penalties for undesireable behaviors, and teaches children alternative behaviors that can more effectively meet their needs.

Discipline is an educational process by which the child care worker helps children to learn about the order in life, that is: to take responsibility for their own actions; to gain control over their impulses; to think over the possible consequences of an action before choosing to act; to make choices in their own lives that do not intrude on other people's rights; and to recognize and be willing to conform to some of the basic expectations and limits of our society. The goal is not to order or coerce children into conforming to adult standards, but rather to help children learn self-discipline. No one is born with self-discipline. It must be learned. Many children who come into care have had few opportunities to learn self-discipline. Instead, they have developed unproductive and unacceptable patterns of behavior, which need to be unlearned.

The agency needs to provide the child care worker with very specific guidelines, defining responsibilities to provide supervision, set rules and expectations, and disperse rewards and punishments. For clarity, for consistency, and for the protection of the child, the worker, and the agency, it is necessary for residential child care agencies to have a written discipline policy. Agency discipline policies need to specifically address the question of what penalties are acceptable whithin the agency and what penalties are forbidden.

In addition to discussing behavior management, this section addresses the issues of incident reporting and dealing with runaway behavior.

Supervision

Prevention is the most helpful approach to discipline. When the child care worker is actively involved in children's activities and providing close supervision, much problem behavior is avoided. The child care worker provides children with protection from hurting themselves, other children, and staff, and from damaging property. Until children are able to set their own limits and develop self-control, the child care worker must provide for them firm, but not rigid, limits and controls.

The following areas need to be addressed in providing guidelines for the child care worker's supervision of children:

1. Child care worker responsibilities. What are the specific responsibilities of the child care worker in providing supervision within the living unit, on the grounds, and off-grounds?

2. Population count. What are agency procedures for accounting for the location of all residents? Does the agency use a sign-out procedure or some form of pass to go from one activity to another?

Rules for acceptable behavior

Another important part of preventive discipline involves setting clear and consistent expectations for children. Children need to know what the rules are and what behaviors are unacceptable. It is important for the agency to have policies which recognize and promote acceptable behavior, not just sanction unacceptable behavior. If children know behavioral limits, they are fully aware when they step out of those limits. They are likely to object verbally to limits and to test the limits to be sure the staff mean what they say, but children gain security from knowing that someone will stop them from going too far.

Most agencies have developed some listing of rules, which are posted or otherwise made available to the residents. Some rules are not formulated as written agency policy, but may be developed within a particular group-living situation by child care workers, often with the participation and input of the children in the group.

The child care manual may answer the following questions:

1. Agency rules. Does the agency have a listing of rules for acceptable and unacceptable behavior? Include it here.

2. Group rules. In what areas do child care workers and children develop rules to meet their own group-living needs? What are the procedures for developing group rules?

3. Informing children of rules. How are children informed of rules? Are they posted somewhere? What are the responsibilities of the child care worker in orienting a new resident to the behavior guidelines and limits?

Rewards

Beyond knowing what the limits are, children need to be able to anticipate and experience the rewards that accompany responsible and socially acceptable behavior. Real change in behavior patterns comes as children try out new behaviors and find them more rewarding than old behavior patterns. They find they are more likely to get what they need and want through responsible behavior.

A common means of providing a system of rewards for responsibility and for improvements in behavior is the development of a level system, point system, or citizenship program. Such a system generally outlines specific behavioral expectations at various levels and specific rewards and privileges that may be achieved at each level.

1. Level system. Does the agency have a level system? Include it here.

2. Child care worker responsibilities. What are the responsibilities of the child care worker in carrying out the level system? How frequently is each child's level reviewed, and by whom?

3. Informing children of rewards. How are children informed of the level system or system of rewards and privileges? How is a new resident oriented to the system?

4. Changes in level system. What provisions does the agency make for staff and children to offer input or propose changes in the level system?

Discipline--Penalties and Sanctions

"Discipline" is used here in its more narrow sense, to refer to the imposing of penalties, sanctions, or loss of privileges as a consequence for unacceptable behavior. Many of the consequences for misbehavior occur naturally through the environment or the social order of events. The child who behaves in an undisciplined manner experiences more than his share of problems, because he may be hurting himself and because he is often out of step with society. Other consequences or penalties may be imposed by the persons responsible for teaching discipline and managing children's behavior. The goal in imposing sanctions is the management of problem behavior, not punishment, which implies a penalty with the intent to hurt. In order for the child to learn from consequences, it is important that penalties be logically related to the problem behavior; that they follow soon after the problem behavior; that they not last excessively long; and that they not be so harsh as to arouse revenge. The intent is for the child to relate the penalty to the behavior, not to the adult who imposed it. Child care workers need to avoid power struggles and issues over who is in control, as these tend to take the attention off the child's problem behavior and focus instead on the child care worker's need to be in control. In the selection of penalties or the withdrawal of rewards, it is also important that the child care worker remember that privileges may be withdrawn, as a consequence of problem behavior, but that staff should never deprive the child of basic needs or rights, including a basic acceptance of the child.

The child care worker must be provided with written policies and procedures regarding discipline and control and specific limitations on potentially damaging responses.

The following issues may be considered in developing discipline policies and providing guidelines to staff who carry responsibility for the management of children's behavior:

1. Indiana State Department of Public Welfare Regulations. The Rules and Regulations for licensure of children's homes specifically address discipline in the following regulation:[1]

   a. Each child shall be treated kindly and humanely at all times.

   b. The superintendent or director, supervisor of group living, or child care staff shall not use, or permit any other employee to use, any method of treatment of a child which is mentally, physically or emotionally abusive.

   c. Methods of discipline shall not include prolonged or frequent confinement to bed; deprivation of meals; vindictive assignment of work; shaving of heads; group discipline for an offense committed by an individual child; permission for any child or group of children to punish another child or group of children; or deprivation of visits with parents.

   d. Discipline shall be administered as an educational process for the purpose of changing attitudes as well as conduct and for helping each child to understand and conform to established standards of behavior by the exercise of inner control, rather than by response to external pressure.

2. Agency Discipline Policy. It is essential that the agency develop written policies and procedures regarding discipline and control. The Indiana State Department of Public Welfare encourages agencies to develop written policies, and has developed a Model Discipline Policy as a guide for child care facilities.[2] The Social Services Fiscal Office Certification Standards require that the agency have "written discipline policies (which are available to residents, parents, guardians or legal custodians, placing agencies and staff) ensuring reasonable disciplinary measures that are not mentally, physically, emotionally abusive."[3]

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[1]Indiana State Department of Public Welfare. Rules and Regulations. Regulation 3-625 - Discipline.

[2]Indiana State Department of Public Welfare. Model Discipline Policy for Residential Child Care Facilities.

[3]Social Services Fiscal Office. Group and Residential Treatment Services--Minimum Standards for Certification, Self-Study Requirement #27.

There are several additional resources available to guide the agency in developing a written discipline policy.[1]

At least the following areas need to be addressed in the agency discipline policy:

a. allowable sanctions or penalties;
b. physical restraint--specific guidelines for its use;
c. seclusion or isolation--specific guidelines for use;
d. corporal punishment;
e. group punishment for individual offenses;
f. punishment of children by other children;
g. withholding of basic needs or rights;
h. verbal responses of threatening, ridicule, or humiliation.

3. Responsibility for discipline. What agency staff carry responsibility for discipline? What are the specific responsibilities of the child care worker?

4. Supports for child care worker in child management. What supports does the agency provide for the child care worker? Upon whom may the child care worker call for assistance in managing problem behavior?

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[1]Child Welfare League of America. Standards for Residential Centers for Children, pp. 50-53.

Harrell, S. A. and Orem, R. C. Preventing Child Abuse and Neglect, pp. 29-32.

Interstate Consortium. Guidebook, pp. 98-102, and Sourcebook, p. MP-41 and pp. SM-129-33.

Ohio Association of Child Care Agencies, Protecting the Child in Residential Group Care, pp. 1-2 and pp. 9-15.

Incident Reports

All significant incidents in the management of problem behavior, including all incidents requiring the use of physical restraint, should be reported through incident reports.

1. Functions of incident report. The incident report serves the following functions:

   a. Provides an efficient means of inter-staff communication of incidents;

   b. Serves as a means of record-keeping involving individual children;

   c. Provides information in the event an incident with a child should become a matter of investigation;

   d. Provides information and statistics which contribute to the evaluation of the agency's program and the establishment of agency policies and procedures.

2. Areas addressed in incident report. The following areas should be addressed in the incident report:

   a. Date/Time of incident

   b. Location

   c. Children involved

   d. Staff involved

   e. Others involved

   f. Description of incident and events leading to incident

   g. Immediate measures taken

   h. Description of any injuries sustained

   i. Description of any medical care obtained

A routing procedure must be established so that appropriate staff are informed of the incident and may take necessary action. Provisions must also be made for the filing of the report in all appropriate agency files.

Runaway

The management of runaway behavior is an issue which must be dealt with in all residential child care settings. Each agency has its own way of dealing with runaways, and there is tremendous diversity in the approaches taken.

> "Children who refuse to stay in the program and who handle stress by running present a number of problems for staff in any open setting. It is not an impossible situation, however; it can be managed. Running, like all difficult behavior, is a symptom and hence the approach will differ from child to child.
>
> With some children the child care worker may need to go out to get them since it may be unsafe for the children to be at large in the community. At times he may have to ask the supervisor on duty to notify the police. There are times when a worker should run after the child and bring him back into the community as soon as possible. For other children, it may be sufficient to let them know that they do not need to run and that they could handle the situation differently. In the matter of running, the rule is to use common sense, consider the safety of the child, and the worker's safety also. It is vital to let the child know that staff care, are concerned, and desire to have the child find alternate ways of handling his tensions."[1]

The agency does need to provide the child care worker with guidelines for the management of runaway behaviors, including:

1. Runaway policy. Does the agency have a specific policy regarding runaway behavior?

2. Notification procedures. What are the procedures for notification of staff, of law enforcement authorities, of parents, and of placing agencies?

3. Discipline upon return from runaway. What are agency procedures for handling discipline upon return from a runaway? What staff are responsible for decisions in this area?

4. Suspicion of abuse. It is the responsibility of the child care worker to immediately report any suspicion that a child may have been abused while on a runaway, either because of statements the child makes or observable physical signs of abuse.

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[1]Klein, Alan F. The Professional Child Care Worker, p. 184.

C. CHILDREN'S RIGHTS AND PRIVILEGES

The removal of a child from family and community and placement in a residential child care facility does not mean that the rights of the child, including constitutional safeguards, have been taken away. During recent years, increasing emphasis has been placed upon defining and protecting the rights of children in residential care. Institutions are establishing policies which ensure that children, their families, and staff are aware of resident's rights and that those rights are protected and enforced. All children in residential care have the right, not only to protection, sustenance, including medical care, food, clothing, regular contacts with family, education, and supervision, but also to receive appropriate therapeutic intervention and humane control.

An important distinction must be made between children's rights and their privileges. A child's rights must always be safeguarded, and are never to be removed for the purpose of discipline, control, or punishment. This differs from privileges which may be given or withheld for cause. Privileges may be earned by the child and become a reward for responsible behavior.

A number of resources are available to the agency for the development of a statement of the rights of children in residence.[1] On the next page is a sample statement of rights. The following pages discuss specific rights and privileges which need to be addressed by the agency. Those rights which are detailed in other areas of the manual are not included here.

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[1]Child Welfare League of America. Standards for Residential Centers for Children, p. 21.

Group Child Care Consultant Services. Basic Course for Residential Child Care Workers, Student Manual III, Separation, pp. 56-8.

Harrell, S. A. and Orem, R. C. Preventing Child Abuse and Neglect, pp. 33-4

Interstate Consortium. Sourcebook, p. SM-109.

Ohio Association of Child Caring Agencies. Guidelines for Protecting the Child in Residential Group Care, pp. 18-20 and p. A-7.

United Nations. Declaration of the Rights of Children.

Rights of the Child in Residential Care

1. Every child has the right to maintenance, including nutrition, clothing, and shelter in a clean and safe environment.
2. Every child has the right to be free from fear, injury, neglect, abuse, and sexual exploitation.
3. Every child has the right to prompt medical care for the prevention, diagnosis, and treatment of medical, dental, and mental health problems.
4. Every child has the right to express opinions and be heard on issues concerning his or her care, treatment, and plans for the future.
5. Every child has the right to maintain ties with his or her family and significant others, unless restricted by court order.
6. Every child has the right to confidentiality regarding case record information and mail.
7. Every child has the right to receive an education appropriate to his or her individual abilities and educational needs.
8. Every child has the right to be provided with opportunities for healthful physical exercise and recreational activities, including some free, unscheduled leisure time.
9. Every child has the right to be provided with opportunities to establish close personal relationships with other children and with caring adults.
10. Every child has the right to enjoy freedom of thought, conscience, and religion.

Mail

Agency policies and procedures regarding the sending and receiving of mail also involve complex decisions. The development of policies concerning children's communication with others outside the agency requires a balance between the need to protect the child from harmful contacts and the child's basic right to communicate with family and significant others.

Department of Public Welfare Regulations address this issue: "Writing material shall be made available for all children cared for in the child caring institution. Each child shall have privacy in handling his correspondence in accordance with his treatment plan."[1] The issue is also addressed in the Certification Standards of the Social Services Fiscal Office: "Each agency shall provide and encourage opportunities for the child to maintain contact with family members and significant relatives through mail, telephone calls and visits. The contact shall be denied only by court order or by CDPW."[2]

The following areas should be addressed for the child care worker:

1. Agency policy about mail. The agency's written policy about children receiving and sending mail should be included here. The policy needs to address the specific conditions under which a child's right to send and receive mail may be curtailed.

2. Staff procedures. What are the procedures for staff members in picking up and distributing mail, to assure that each child receives mail without delay and to assure that residents do not have the the opportunity to tamper with the mail of other residents? How do children secure stationery and stamps for letter writing?

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[1]Indiana State Department of Public Welfare. Rules and Regulations. Regulation 3-331.

[2]Social Services Fiscal Office. Group and Residential Treatment Services--Minimum Standards for Certification. Self-Study Requirement #74.

Religion

Within our society freedom of religion is considered to be a right of all persons. In child care agencies the development of guidelines concerning religion is a particularly sensitive area. Department of Public Welfare Rules and Regulations require that: "Each child caring institution shall provide proper arrangements for each child to have formal religious training and training for spiritual development and to attend a worship service of a church in accordance with the religious faith of the child, so far as is practicable."[1] The Certification Standards of the Social Services Fiscal Office further require that the: "Agency shall have written policies on religious training, which are made available at intake to parent(s), guardian, or legal custodian."[2]

The following areas should be addressed for the child care worker:

1. Agency policy on religious training. The agency's written policy should be included here.

2. Staff responsibilities. A clear statement should be provided of any responsibilities of child care staff in carrying out the agency's religious program.

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[1]Indiana State Department of Public Welfare. Rules and Regulations. Regulation 3-328.

[2]Social Services Fiscal Office. Group and Residential Treatment Services--Minimum Standards for Certification. Self-Study Requirement #77.

Children's Personal Possessions

It is generally considered a right of the child entering care to bring personal belongings and to acquire belongings while in care. The security of having and keeping personal possessions contributes to the child's sense of personal identity and also offers the child an opportunity to learn to care for personal possessions. Children need a safe place for belongings, but there are clearly limits to the responsibility the agency can take for the protection of children's possessions. The agency may need to limit or supervise the use of some items while the child is in care.

1. Agency policy. What is the agency policy regarding the bringing and acquiring of personal possessions?

2. Protection of property. What are agency procedures for the protection of a child's valuable possessions? Some agencies provide a "lock box" to which child and staff have a key.

3. Limitations. What limitations does the agency place on property that may be brought into care? What are agency guidelines for the borrowing, loaning or giving away of a child's personal possessions?

Privileges

Allowances

Children need to receive a regular allowance in order to have the experience of possessing money and learning how to spend it appropriately. Although children are not asked to assume expenses for their own care and treatment, each child may be responsible for meeting specific expenses, according to the child's ability to pay. Allowances are generally not withheld as a means of punishment. Reasonable deductions, however, based on the extent of damage and the child's ability to pay, may be made to pay for damage done by the child.

1. Allowances. What is the agency scale of allowances? Is the scale based upon age or upon specific behavioral guidelines?

2. Children's accounts. What is the agency procedure for maintaining accounts of the children's money?

3. Expenses for children. What are some of the routine expenses for which a child may need to plan (e.g. stationery, stamps, make-up)?

4. Fines and restitutions. What is the procedure for the payment of any fines as restitution for damage done by the child?

Privileges

Paid jobs

A significant step toward maturity and independence is taken when the child has an opportunity to earn money through paid jobs within the agency or through employment in the community. Besides learning to budget, spend, and save money, children can explore different kinds of work and learn to take responsibility within the role of employee. An older child who has regular work may be expected to pay for some basic needs, if this is in accord with the child's treatment plan.

1. Paid jobs in the agency. What jobs in the agency are designated as paid jobs? How are children selected for these jobs?

2. Jobs in the community. How may a child qualify to seek or accept employment in the community? What supports does the agency provide for the child with a job in the community (e.g. transportation, adjustments in schedule)?

3. Management of money child earns. What are the agency procedures to assist the child in management of money earned? Is a designated part of the child's earnings to be placed in a savings account? How are savings accounts set up?

4. Protection from exploitation. What are agency policies and procedures to protect the child from exploitation and to assure that the agency complies with federal, state, and local laws related to child labor?

Dating

Older children who have shown responsible behavior may be allowed to have dates. The agency develops guidelines for dating and a procedure for staff to meet the persons who are dating agency residents.

1. Eligibility. Who is eligible to have dating privileges? What are the age and behavioral requirements?

2. Staff meeting residents' dates. What is the procedure for agency staff to meet the persons residents are dating?

3. Dating rules. What are the rules for dating (e.g. getting permission, frequency, curfew, informing staff where resident will be)?

Privileges

Visits with persons in community

Since a basic goal of residential care is to enable children to function successfully in the community, children need to be encouraged to become involved in community activities and form relationships within the community. Children may earn privileges to visit in the homes of persons in the community and to invite those persons as guests at the child care facility.

The agency needs to provide guidelines for such visits.

1. Eligibility. What are the guidelines for determining when a child is able to handle visits in the community?

2. Staff contact with children's friends. What are the procedures for staff to meet or talk with the resident's friends or the parents of the friends?

3. Rules for visits with friends. What are the rules for visiting (e.g. getting permission, frequency, curfew, informing staff where child will be)?

Privileges

Telephone

Use of the telephone by children in residence to communicate with family or friends may be viewed by the agency as a child's right or as a privilege to be earned by the child. Practical issues may need to be considered, such as the availability of telephone lines that do not have to be kept open for emergency or agency business.

1. Agency policy. What is the agency policy for use of telephones by residents? Must a child earn the privilege to use the telephone? If so, how?

2. Procedures. Procedures need to be developed to clarify times the telephones may be used, length of time a child may talk, to whom a child may place calls, and from whom a child may receive calls.

3. Payment for long distance calls. Who pays for long distance calls? If children make collect calls, what arrangements are made to gain prior approval from persons who may be called collect, and to assist families who may need agency support in setting limits on the amount they can spend for long distance calls?

Privileges

Smoking

The question whether an agency will permit, discourage, or forbid smoking by residents involves consideration of complex issues of health, safety, agency values, children's rights to self-determination, and social pressures. Whatever position the agency takes on this issue, the child must be clearly informed of the agency policy, of procedures to protect the safety of all residents and staff, and of penalties that may be imposed upon residents who do not follow agency procedures.

1. Agency policy. What is agency policy regarding smoking? If smoking is permitted, are decisions based upon age, already established smoking habit, or behavior?

2. Permission of parent or guardian. Does the agency require permission of the child's parent or guardian? If so, how is permission secured?

3. Procedures. Procedures need to address the following issues: where smoking is permitted; where smoking is not permitted; when smoking is permitted; safety practices to prevent fire; where and by whom cigarettes are kept; how residents purchase and pay for cigarettes.

4. Supervision. What are the specific responsibilities of the child care worker in supervising residents smoking?

5. Penalties. What are the penalties that may be imposed upon residents who do not follow agency policies and procedures in relation to smoking?

D. RELATIONSHIP WITH CHILD'S FAMILY

The family of every child in care is an irremovable part of the child's psychological life, irrespective of external circumstances. A goal of placement is to strengthen, repair, and restore family relationships. Plans made concerning the child consider the child to be a continuing member of the family. Unless family/child contacts have been terminated by court order, the child has the right of access to the family and they to the child.[1]

It is essential that the child care worker understand the significance of the child's family in the child's life and the importance of continued family contact throughout the period the child is in care. It is not uncommon for child care workers, who work intimately with the child, developing close relationships, sharing the child's hopes, joys, fears, and disappointments, and struggling to help bring about behavior changes in the child, to have some mixed feelings about the child's ongoing contact with family. The child care worker may be aware of how the child has been emotionally damaged by earlier family relationships, and may experience with the child emotional upsets and temporary worsening of the child's behavior and functioning around contacts with the family. The child care worker can come to see these upsets as constructive and as an essential part of the child's growth. The child's family is a permanent part of the child. No matter how troubled the family may be, they are all the child has ever known and may be the child's entire security. When separated from them the child feels loss of a part of self. The child may never really understand why he/she has been separated from family

[1]Group Child Care Consultants. Basic Course for Residential Child Care Workers, Student Manual III, Separation, p. i.

and may develop a series of irrational explanations. It is through ongoing family contact that the child can deal with the pain of separation and can gradually come to see the family realistically. With support and guidance, many children and their families can learn new attitudes and behaviors and eventually be reunited.[1]

When return to family is not a possibility and is ruled out in the treatment plan, the child must also work through feelings of separation and come to terms with past family experiences. For that child, other alternatives must be explored. Every child needs some hope of a permanent home and an ongoing relationship. The alternatives for the child who will not return home include placement with relatives, a foster home, a group home, adoption, or preparation for independent living. Until such plans can become reality, or while preparing for independent living, the child may gain some sense of belonging through a Foster Grandparent or Big Brother/Big Sister relationship. Or relatives may be able to meet that need, even when they cannot provide a permanent home.

In order for the child care worker to work effectively with the child and his/her family, the following issues need to be addressed:

1. Agency policy and services. What is the agency policy about including the family in the child's treatment? What services does the agency offer to help families understand the agency program and to participate in the child's treatment?

2. Staff responsibility. What staff carry primary responsibility for communicating with the child's family, arranging visits, and carrying out plans to strengthen family relationships or to seek alternative permanent plans for the child? How is the child care worker informed of significant issues in the child's family relationships?

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[1]Littner, Ner. The Importance of the Natural Parents to the Child in Placement.

3. Child care worker's role with child's family. What is the role of the child care worker in working with the child's family? What guidelines does the agency provide to the child care worker for helping the child's family to be comfortable visiting the child?

4. Child care worker's role with the child. What is the role of the child care worker when the child wants to talk about family issues? What responsibilities does the child care worker have for communicating knowledge of family issues in the child's life to the staff person working directly with the child's family?

5. Visiting policies. What are the agency's visiting policies?

6. On-grounds visiting procedures.

   a. Schedules. When may visits be scheduled, and how is the child care worker informed of scheduled visits?

   b. Passes. Does the agency provide passes to persons who are authorized to visit the child? What are the procedures for visiting passes?

   c. Location. Where on the grounds do families and children visit?

   d. Child care worker responsibilities. Does the child care worker have any responsibility for supervising on-grounds visits? What are guidelines for allowing the family and child some private time, without interference from staff or other residents?

   e. Records of visits. What records are kept of visits to the child, and what are the responsibilities of the child care worker in keeping records?

7. Off-grounds or home visiting procedures.

   a. Schedules. When may visits be scheduled and how is the child care worker informed of scheduled visits?

   b. Passes. Does the agency provide visiting passes? What are the procedures for visiting passes?

   c. Preparation for visits. What are the child care worker's responsibilities in helping the child prepare for a home visit, e.g., packing, preparation of any medications the child needs to take, withdrawal of money from the child's account, etc.?

   d. Records of visits. What records are kept of visits off-grounds. and what are the responsibilities of the child care worker in keeping records?

8. Suspicion of abuse. It is the duty of the child care worker to immediately report any suspicion that a child may have been abused while on leave from the agency, either because of statements the child makes or because of observable physical signs of abuse.

E. HEALTH CARE AND HYGIENE

Health Care

Health care is a primary responsibility of any residential child care agency. The agency is responsible for making specific arrangements to provide for the services of a physician to supervise the establishment and maintenance of a comprehensive program of preventive, routine, corrective, and emergency medical and dental care for all children in care.

No matter what health specialists may provide services within the agency, it is important that the child care worker be the guardian of the child's health and physical care. The child care worker is closest to the child in daily living and is best able to observe any changes in the appearance, behavior, or physical reactions. He/she can usually recognize whether a child is minimizing or exaggerating complaints or symptoms of illness. It is also the child care worker who must know what to do in case of illness, accident or injury, and must help the child take medications that have been prescribed and follow other medical instructions. And the child care worker is the one who cares for, supports, and encourages a child during illness. The child who is ill experiences not only discomfort and pain, but anxiety and a need for reassurance. A child's illness, or sometimes pretended or exaggerated ailments, may be clues to problems or anxieties in another area of the child's life. Such observations require the child care worker's intimate knowledge of the child and ability to recognize and respond to the stresses the child may be experiencing.

In order to provide for the health care of each child, the child care worker must have knowledge of the agency's health program and specific

procedures, and of the child care worker's responsibilities in first aid, care of ill children, and administering of medications. The following items need to be included in this area:

1. Health Program of the Indiana State Board of Health. The Board of Health requires that each agency develop a written Health Program in compliance with regulations for licensure. The Board of Health further requires that this written Health Program be on the premises where children are housed and that child care workers have a working knowledge of its contents. The agency's written Health Program should be included in this section of the manual.

   State law mandates Board of Health inspection of all child care facilities at least yearly. The nurse consultant from the Board of Health examines medical records, and checks to see that staff are trained in First Aid and have supplies accessible, that medications are locked up, and that all medication administered to children is properly recorded.

2. First Aid and Care of Ill Children.

   a. Physician's directives. The agency physician is required to prepare written directives for the care of ill and injured children. These must include the directions for seizures, poisoning, hemorraghing, artificial respiration and choking. A copy of the physician's directives should be included here.

   b. Red Cross Manual of First Aid. The First Aid Manual must be available for ready use. State where the manual is located.

   c. First aid supplies. First aid supplies must be on hand. Where are the first aid supplies located? Include a list of supplies. What are the responsibilities of the child care worker to replenish those supplies as they are used?

   d. Staff trained in first aid. A staff member must be present at all times who is trained in first aid. What arrangements has the agency made to assure that a trained person is available?

3. MEDICAL EMERGENCY. Although emergency procedures have been detailed in an earlier section of the manual, it is recommended that the procedures for medical emergency be restated here, including the telephone numbers of the physician, hospital, and ambulance service. Also included should be the procedure for notifying other agency personnel and the procedure for completion of incident reports.

4. Agency procedures for illness and for routine medical and dental care.

   a. Notification. Whom does the child care worker notify when a child is ill?

   b. Contacting physician. Who is responsible for contacting the physician?

c. Routine exams. Who schedules routine medical and dental examinations?

d. Medical records. Who maintains the child's medical records, and how are results of examinations and treatment recorded?

e. Medical recommendations. Who is responsible to see that medical recommendations for the child are followed in the agency?

f. Transportation. Who is responsible for transporting and accompanying the child for medical and dental appointments?

5. Medications.

a. Procedures. What are the agency procedures to assure that all medications prescribed by the physician are administered as directed?

b. Recording. What forms are used to keep records of medication administered?

c. Child care worker responsibilities. What are the specific responsibilities of the child care worker in supervising children taking medication? Whom does the child care worker inform if a dose of medication is missed or if a child refuses to take medication?

d. Medication sent to school. What are the procedures for medication that must be taken during the school day? How are school officials informed?

e. Off-grounds visits. What are the procedures for sending medication with a child who goes for an off-grounds visit ? Parents or other care takers need to know the name of the medication, the reason the child is taking it, and specific directions for administering the medication.

f. Disposal. How are unused portions of any child's medication to be disposed of?

g. Psychotropic medications. If psychotropic medications are prescribed for therapeutic use, include the agency policy and procedures for the use of psychotropic drugs. Child care workers need to understand the therapeutic use of psychotropic drugs and to be alert for any undesirable side effects.

6. Health Education and Sex Education. Growing children need to understand their own physical and emotional development and to develop sound health and hygiene habits. Important concerns include personal care and cleanliness, proper care of teeth, proper nutrition, the need for adequate physical exercise, an understanding of sexual maturation, and the development of sexual attitudes. Children also need to understand the physical, behavioral, and emotional effects of misused drugs.

a. Agency programs. What programs does the agency provide in the areas of health education, drug education and sex education?

b. Child care worker's responsibilities. What are the specific responsibilities of the child care worker in providing education and guidance for children in these areas?

c. Agency policy. What is agency policy regarding the use of contraceptive drugs or devices? Does it include a procedure for informing the legal guardian when contraception is provided? Are family planning services used for birth control information and education about sexually transmitted diseases?

Hygiene

In the area of personal hygiene and grooming the child care worker must keep two objectives in view: to help the child establish his/her habits of personal hygiene; and to maintain good standards for the child until the child is ready to take over responsibility for these habits. Good grooming and cleanliness not only make the child more acceptable to others, but improve the child's sense of self-worth. In addition, the child care worker is responsible for the health of the group and must be alert to good hygiene as a means to prevent contagion and diseases common in group living. Some children resist hygiene routines for a variety of reasons. They need to be allowed latitude in making choices about grooming and dress and in doing things for themselves. Supervision by the child care worker, however, remains necessary even when the child has learned to carry out personal hygiene more or less independently. Recognizing the child's need for privacy, the child care worker should, nevertheless, occasionally see each child in the nude to determine whether development is progressing normally and to note any health problems that may need attention. It is also at these times that children may be able to ask questions or seek reassurance about their own development.

Specific guidelines need to be provided to help the child care worker carry out responsibilities in this vital area of child care.

1. Minimum requirements and routines. What are the minimum requirements in the areas of washing before meals, tooth care, bathing, washing hair, and changing underwear? What are the routines for the supervision of these activties?

2. Toiletry items. How does the agency provide for the necessary toiletry items: soap, shampoo, deodorant, tooth brushes, tooth paste, nail clippers, combs, brushes, etc?

3. Hair care.

   a. Hair cuts and styling. What arrangements are made for hair cuts and styling? Is the child expected to assume any of the cost for professional hair care?

b. Limits. Does the agency place any limits on the child's freedom to select a hair length or style?

c. Hair care for black children. When black children are cared for by white child care workers, the workers may need to learn some specific techniques and skills to help the child with hair care. Hair care products, including grease (oil pomade) and combs manufactured for blacks can be purchased in drug stores in the black community and need to be made available to the child. Hair cuts and styling should be arranged in salons and barber shops that have experience in styling hair for blacks. These salons are an important resource for the child care worker learning to help the child with hair care.[1]

4. Toilet problems. The child care worker needs to be aware of children's toilet habits and to be alert to any problems with irregularity or with bowel or bladder control. When children have problems with enuresis (wetting) or encopresis (soiling), what routines does the child care worker follow to assure proper hygiene, while protecting the child from ridicule, embarrassment, or punishment?

5. Menstruation. What are the responsibilities of the child care worker for providing girls with a clear explanation and reassurance about this biological process, and for providing the necessary supplies and guidance in using and properly disposing of supplies?

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[1]Ruth, R. A., Snell, T. B., Tajalli, I. Q., and Navarre, E. L. The Care of Minority Children in Residential Facilities, pp. 20-23.

F. SCHOOL

Every child in residential care has a right to receive an education appropriate to his/her individual abilities and to derive the greatest benefit from the school experience. After evaluation of the child's particular needs and special abilities, an educational plan is developed for each child, addressing the child's educational needs, needs for remedial training and tutoring, needs for vocational training and counseling, and opportunities to develop special interests and to grow socially through contacts with peers. In order to assure the best possible school adjustment for each child, all staff of the residential child care agency need a clear understanding of the school and its program. Cooperation and a clear means of communication between agency staff and school personnel are essential. It is desirable for all children, who are able, to attend schools within the community. A school on the grounds may be provided to meet the special needs of some children with physical, emotional, mental, educational, and behavioral problems that are not adequately met in the community schools. Again, residential staff need to understand the on-grounds school program, and cooperation and a clear means of communication between residential and educational staff are essential.

Each agency develops policies for establishing individual educational plans and procedures for working cooperatively with the school and providing staff support to each child's educational program. Although the child care worker may not have major responsibilities in working directly with the school around a resident's enrollment, academic program, and behavioral adjustment at school, the child care worker is involved daily with the

issues and details of the resident's school attendance and adjustment. The child care worker, therefore, needs to know about the schools residents attend and needs clear procedures to support school attendance and learning, and to communicate with the school. The following questions need to be answered in order for the child care worker to be effective in supporting the educational program:

1. Schools. What school or schools are attended by residents, and where are they located?

2. On-grounds school. If the agency has an on-grounds school, what are its functions, how is it organized, and how are children selected to attend school on grounds?

3. School schedules. What are the school schedules?

4. Transportation. How do students get to and from school? If they walk, what route do they follow, and what are the rules for their behavior en route? If they ride the school bus, where do they meet the bus and when, and what are the rules for their behavior on the bus? If agency staff provide transportation, what staff are responsible for transportation?

5. Staff responsibilities. What are the specific responsibilities of agency staff in relation to the schools? Who is responsible for enrollment or withdrawal from school, aiding in selection of appropriate courses, consulting with school administrators, counselors and teachers about individual students' educational needs and adjustment problems? When a child care worker becomes aware of a child's problems in learning or school adjustment, with whom should the child care worker share these concerns?

6. School discipline policies. What are the discipline policies of the schools? How is the child care worker informed in the event of detention or suspension from school?

7. Agency discipline policies. What is the agency policy for dealing with discipline problems at school? If a student is suspended from school, what arrangements does the child care worker need to make to structure that student's time out of school?

8. Notification of absence. What are the procedures for notification of the school in the event of a child's illness, medical or dental appointments or absence from school for any other reason? What are the child care worker's specific responsibilities?

9. Study time. What provisions are made for residents to study at home? What are the specific responsibilities of the child care worker in providing for a quiet time, work space with adequate lighting, supervision, and suitable supplies and reading materials?

10. Tutoring. What provisions are made for tutoring of students who need extra help? What are the responsibilities of the child care worker in identifying students who need assistance and referring them for tutoring?

11. School supplies and fees. How does the agency provide for payment of school fees and for purchase of school supplies for each student?

12. Extracurricular activities. How does the agency encourage and support student participation in extracurricular activities? How do students get to and from activities outside of regular school hours?

G. RECREATION

The recreation and leisure activities program of the child care agency may provide limitless opportunities for children to grow physically, mentally, socially, and emotionally. Activities allow the individual child to develop interests and skills, to experience success and gain a sense of self-worth, and to release tension and express feelings. Within the group, children learn communication and problem-solving skills, leadership, and teamwork abilities. Children in residence need to be included in the planning of leisure activities, encouraged to contribute ideas, and helped to carry out program plans. Children should be offered a range of choices and freedom to choose to participate or to not participate. Staff members provide opportunities, encouragement, motivation, leadership, and guidance for recreational activities. Participating with children allows the staff member to strengthen relationships with children in care.

The agency's recreational program should include a wide range of activities including physical activity, games, arts, crafts, needle work, cooking, cultural experiences, dance, drama, music, nature, and camping.

Many leisure activities do not require direction or leadership from staff. Children need some free, unscheduled leisure time and some time to be alone and undisturbed. Time also needs to be allowed for spontaneous group activities, playing, singing, dancing, or listening to records. Staff planning leisure activities need to be aware of and avoid sex stereotyping that may take place in recreation programs. Boys and girls need a wide choice of activities and the opportunity to develop their individual interests.

Community resources are an essential part of the agency's recreation program. The community offers a variety of facilities, cultural resources, and opportunities, but more importantly allows the children to participate with children and adults outside the agency. This is an essential part of preparing the child to live again in the community.

The structure of each agency's recreational program and the specific responsibilities of child care workers will vary greatly from agency to agency. These are the questions a child care worker might ask about the program and about his/her responsibilities:

1. Staff responsibility. Who carries overall responsibility for the agency's recreational program? If the staff includes a recreation or activities specialist, what are his or her responsibilities and hours of work? What are the child care worker's responsibilities in planning and supervision of recreation? When there is a recreation specialist, child care workers may need encouragement or permission to plan and participate in leisure time activities with their group of children.

2. On-grounds recreational facilities. Describe the recreational areas and equipment on the grounds of the child care facility. List any rules or guidelines for their use.

3. Community resources. Describe the recreational resources available in the community. What are the guidelines for residents participating in community activities? What arrangements are made for increasing independence in activities for residents who require less supervision?

4. Transportation. What are the arrangements for transportation to community activities and recreational facilities?

5. Funds. What agency funds are available for recreational activities, and what are the guidelines for use of those funds? How does the child care worker gain access to those funds?

MANAGEMENT OF HOUSEHOLD AND DAILY ROUTINES

A. DAILY SCHEDULE AND SPECIAL OCCASIONS

Daily Schedule

The daily routines of life in the group home or cottage take on a meaning for children and staff far beyond the process of smoothly accomplishing the tasks of each day. Dependable daily routines provide reassurance and security for children who have experienced disruption, disorganization, and insecurity in the process of separation from their families and placement out of their own homes. There is a risk, however, that those consistent and predictable routines may become rigid and inflexible and tend to stifle rather than encourage the growth of children. Routines are not only convenient, but essential, for staff in carrying out their tasks and meeting the many demands made upon them each day. But, it is the responsibility of the child care worker to see that routines do not take priority over the individual needs of children. Children need to be offered the opportunity to participate in decisions about the daily routines of their groups.

The child care worker is asked to perform an incredible juggling act, managing the daily routines for the group and meeting all the agency schedules and the schedules of individual children for school, extra-curricular activities, tutoring, recreation, medical appointments, appointments with other staff or outside professionals, off-grounds jobs, and visits with the child's family. It is essential for the agency to provide sufficient guidance and information to the child care worker, so that the child care worker's energies and attention need not focus primarily upon carrying out the schedule. The following steps may be taken by the agency in order to assist the child care worker with these tasks:

1. Daily schedule. Provide a daily schedule guide for staff and children and make it available for posting in the living unit. There may be a different schedule for weekdays and for weekends and holidays. The daily schedule guide might include, but not be limited to the times for:

   Wake-up
   Meals and snacks
   Departure and return from school
   Chores
   Recreation
   Study time
   Bedtime

2. Weekly schedules. Provide schedules weekly for those activities that vary from day to day, such as:

   Tutoring
   Planned recreational activities
   Medical appointments
   Individual or group counseling appointments

3. Appointment books or calendars. Provide child care workers with appointment books or calendars with sufficient space to plan each day and include group schedules and appointment times for individual children.

Birthdays

The way in which a child's birthday is celebrated can be significant in contributing to the child's security, sense of self-worth, and individuality. Each child's birthday should be celebrated individually in the group with which the child lives.

1. Celebration. What are the agency practices, and what are the responsibilities of the child care worker in planning birthday celebrations?

2. Gifts. What is the agency procedure for the purchase of birthday gifts?

3. Family involvement. Does the agency make provisions for the involvement of the child's family in the celebration of the child's birthday?

Holidays

Planning for and celebrating holidays is not only a growing experience for the individual child, but also provides opportunities to strengthen group participation and group relationships and build and strengthen relationships between child care workers and the children in their care. In addition, ethnic, cultural, and religious celebrations may enhance the child's sense of identity and may help children gain respect and appreciation for diversity among the children.

1. Traditions. What holidays are regularly observed in the agency, and what traditions has the agency developed around those celebrations?

2. Individual and group initiative. How does the agency encourage individual children or child care workers or groups to initiate the celebration of holidays?

3. Funds and resources. What funds and other resources are available within the agency to contribute to the celebration of holidays?

4. Family involvement. Are there provisions for the involvement of families in the celebration of holidays?

B. FOOD SERVICES

For all of us, the food we eat and how we eat it has meaning far beyond its nutritional value. Besides its nutritional value, food has a pleasure or enjoyment value, psychological significance, and social value. Many children entering residential care have neither been provided with proper nutrition nor learned healthful eating habits. They must be provided with a balanced diet of sufficient quantity to provide for their physical growth and development. The Indiana State Board of Health takes the responsibility to assure that food provided to children in child care institutions meets the Recommended Dietary Allowance of the National Research Council. The provision of nutritious meals alone, however, is not enough, because children are not likely to eat food they do not enjoy. A variety of foods must be served, which are well-prepared, tasty, and attractively served so that children may enjoy meals and snacks. Food also carries a deeper psychological significance for children and is usually associated with security and love. Overeating or other eating problems in children are often related to problems the child has had in developing a sense of security. The food offered in the children's home may provide a valuable source of security for the child. Finally, eating is a social process, an activity around which people learn to interact with one another. Children learn a variety of social skills around the preparation and eating of foods.

The child care worker plays a significant role in ensuring or enhancing the nutritional, psychological, social, and pleasure values of food for children in care. In addition, the child care worker may carry responsibility for food preparation and supervision of children as they learn to prepare and

serve meals and snacks. The child care worker needs information in the following areas:

1. Indiana State Board of Health Food Service Program Plan for Child Caring Institutions. The Board of Health requires that each agency develop a written Food Service Plan in compliance with licensing regulations. The Board of Health further requires that this written Food Service Plan be on the premises where children are housed and that child care workers have a working knowledge of its contents. The agency's written Food Service Plan should be included in this section of the manual.

   State law mandates that the Indiana State Board of Health inspect all child care facilities at least yearly. This includes inspection by a sanitarian and a nutritionist, who will evaluate the agency's program and make recommendations for compliance.

2. Agency nutrition program. Who in the agency is responsible for the preparation of menus? Where are menus posted and filed?

3. Special diets. What arrangements are made for children with special dietary needs? What are the responsibilities of the child care worker in assuring that the child receives the special diet?

4. Ordering or purchase of food. What are the agency procedures for the ordering or purchase of food? What are the specific responsibilities of the child care worker?

5. Food storage. Provide guidelines for the storage of food. Specific regulations of the Indiana State Board of Health are provided in Regulation HFD 17. The attention of the child care worker needs to be directed especially to regulations regarding refrigeration temperatures, the labeling of bulk foods in storage, storing foods above floor level, and the separate storage of food and non-food items (specifically toxic chemicals).

6. Meal and snack times. Include a schedule for meals and snacks for weekdays, weekends, and holidays.

7. Preparation of meals. What staff are responsible for preparing meals? What are the specific responsibilities of the child care worker? How does the child care worker gain access to recipes for items included on the menu? How are the children in residence included in the preparation of food, and what are the guidelines for supervising children in food preparation?

8. Serving of meals. Where are meals served? Who is responsible for table setting? What dishes and utensils are used?

9. Cleanup and dishwashing. What are the procedures for clean-up and dishwashing, and what are the child care worker's responsibilities for supervision of these procedures?

10. Staff guidelines for supervision at mealtime. Such guidelines will vary from one agency to another, but may address the following issues:

    a. Child care workers are required to eat with the children and receive the same food as the children except for special dietary needs of the staff worker.

    b. Child care workers supervise serving of food and mealtime behavior. Provide specific guidelines for teaching children manners, proper eating habits, and social skills.

    c. Child care workers should encourage a relaxed mealtime atmosphere.

    d. Children should not be forced or coerced to eat against their will.

    e. Meals are not to be withheld from children for any reason.

    f. What are the dress requirements for meals?

    g. Is there an agency routine for beginning and ending meals?

    h. What is the procedure for setting aside food for a child who is not at the table for any reason?

C. HOUSEKEEPING AND SUPERVISION OF CHILDREN'S TASKS

As manager of the living unit, the child care worker carries the dual responsibility of managing the physical details of the living unit in a way that provides a clean and safe living environment for children and of teaching children good work habits by providing them with appropriate tasks and supervision.

When children carry out daily unpaid chores in the living unit or on the grounds, they learn to assume responsibility and gain a sense that they have an investment in the home. In addition, they need some opportunities to carry out special assignments for which they are rewarded by earning money.

The child care worker makes work assignments in accordance with the child's age, interests, ability, and readiness. The child care worker sets standards for the completion of the work and progressively helps the child to reach those standards through instruction, demonstration, working with the child, and checking back on completed work. Children need to understand why the work must be done and to gain recognition for their efforts. They also need a chance to participate in selecting some work assignments and an opportunity to become familiar with a variety of tasks.

It is the responsibility of the agency to set over-all standards for housekeeping and maintaining of a safe and healthful environment. These agency standards need to be clearly presented to the child care worker, who then becomes responsible for assuring that the standards are met.

The following issues need to be addressed in orienting the child care worker to the responsibilities of housekeeping and supervision of children's work assignments:

1. Housekeeping standards. What are the specific agency standards for housekeeping? It is recommended that the agency develop a list of minimum standards that is in conformity with the Rules and Regulations of the Indiana State Department of Public Welfare and with Indiana State Board of Health standards, specifically Regulation HFD 17, Regulations Pertaining to the Sanitation of Food Service Establishments. The list of minimum housekeeping standards should address at least:

   a. specific standards for the cleaning and sanitation of the kitchen and food preparation area;

   b. procedures for garbage and trash removal and for keeping trash in tight, easily cleanable receptacles which are covered with close-fitting lids pending removal;

   c. specific standards for the cleaning and sanitation of bathrooms;

   d. specific dust arresting methods for the cleaning of floors;

   e. provisions for the changing of bed linens once each week and more frequently when individual conditions require;

   f. procedures for the locked storage of all materials containing poisons, drugs, and other harmful chemicals, and procedures for the dispensing and close supervision of the use of potentially harmful cleaning materials by residents.

2. Cleaning supplies. What are the procedures for ordering or purchase of cleaning supplies?

3. Maintenance procedures. What are the child care worker's responsibilities in the maintenance of the living units? What are the procedures for reporting maintenance problems in the facilities and equipment of the living unit or the grounds outside the living unit?

4. Grounds. What are the standards for maintaining the grounds outside the living unit? Whose responsibility is this, and what are the specific responsibilities of the child worker? This section may include lawn maintenance, snow-removal, and maintenance of play equipment.

5. Residents' daily chores. What are agency procedures for the assignment and supervision of the daily chores of residents?

6. Paid jobs. Which jobs are designated as paid work assignments for residents? How are these jobs assigned to residents and what are the procedures for recording completed work and paying the resident for the job?

D. CLOTHING

The clothing a child wears has a meaning in the child's life far beyond the functional purpose of warmth and protection. Whether or not the child's clothing fits well, is attractive, and is well cared for becomes a reflection of the concern of the child's caretakers and of the child's own self-image. Children in residential care are not often competent in selecting and purchasing appropriate and affordable clothing and in caring for their own clothing. Learning to do this is a gradual process and requires supervision and teaching by the child care worker. All children, but especially those who move on to independent living situations, need to gain competence in selecting and caring for their clothing before they leave residential care.

There are many different approaches to the way clothing is handled in child care agencies. Child care workers need to understand the agency's policies and procedures related to clothing and to know specifically their responsibilities in the following areas:

1. Initial clothing inventory. It is generally the responsibility of the agency or person placing the child to assume the cost of clothing at the time of admission. The child care agency develops a Basic Clothing List for the purpose of taking inventory of the clothing the child has brought and of determining the child's needs. What are the responsibilities of the child care worker in taking inventory of the child's clothing, and what are the agency guidelines for determining appropriateness, proper fit, and state of repair of the clothing the child has brought?

2. Purchase procedure. What are the procedures for the purchase of needed clothing? Does the agency use purchase orders or cash? What agency forms are required to secure these? Does the agency have a clothing supply room, and what are the procedures for selecting clothing from the agency supply? Who accompanies the child on shopping trips, and what are guidelines for helping the child to select appropriate and affordable clothing?

3. Periodic inventory. What are agency procedures for the periodic replenishing of children's clothing? In what ways are children helped to plan and select clothing within a budget?

4. Used clothing. What does the agency do with clothing that no longer fits the child, but remains in good and useable condition?

5. Home visit inventory. What are the agency procedures to account for the clothing and personal items a child takes on home visits and those items returned from the visit?

6. Inventory at discharge. What are agency procedures for the inventory of clothing at discharge? In the event of runaway, what is the procedure to see that a child's clothing is accounted for and packed?

7. Marking. How and by whom is clothing marked, to assure that each child's clothing is clearly identifiable?

8. Care of clothing. How does the agency handle laundry, ironing, dry cleaning, mending, and shoe repairs? What are the specific responsibilities of the child care worker, and what are guidelines for use of laundry equipment and sewing machines? How does the child care worker guide children, according to their age and capabilities, in learning to care for their own clothing, including careful storing in closets and drawers?

9. Borrowing and lending. What is agency policy about the borrowing and lending of clothing among children in residence?

10. Dress code. Does the agency have a dress code? If so, include it here.

11. Monitoring of dress by child care workers. What are the responsibilities of the child care worker in assuring that children are dressed appropriately for protection from weather, for specific occasions, and within the dress code?

E. MONEY MANAGEMENT

Residents' Money

A significant part of helping to prepare the child for life outside the institution or group home is to provide the child with opportunities to earn money and to make decisions about spending his/her own money. Learning to manage one's own money is a gradual process and requires the guidance of the child care worker.

The child care worker's tasks and responsibilities need to be described:

1. Children's accounts. What is the agency procedure for maintaining accounts of the children's money?

2. Sources of money. What are the sources of money which may be deposited in children's accounts?

3. Allowances and wages. What is the procedure for distribution of children's allowances and wages for paid jobs within the agency?

4. Withdrawal from accounts. How do children withdraw money from their agency accounts? What are agency guidelines for children carrying money?

5. Expenses for children. What are some of the routine expenses a child may need to plan for (e.g. stationery, stamps, make-up)?

6. Fines and restitution. What is the procedure for the payment of any fines as restitution for damage done by the child?

7. Bank accounts. Do children have the opportunity to open bank accounts? If so, what is the responsibility of staff in assisting the child?

Agency Money

The child care worker may also carry responsibilities for the management of agency money.

1. Agency funds. For what agency funds does the child care worker have responsibility?

2. Request for funds and accounting for funds. What are the procedures for requesting agency funds and accounting for expenditures?

F. TRANSPORTATION OF RESIDENTS AND USE OF AGENCY VEHICLES

The provisions made for transportation of children in residential care are an essential part of providing quality services and of carrying out the goal of helping children to maintain and strengthen links with the community. Transportation must be provided for medical care, school attendance, vocational training, extracurricular activities, recreation, shopping, and sometimes for jobs in the community. The agency must also have a means of transporting children in cases of emergency.

The agency is responsible for the safety of all children and must develop policies and procedures for the safe transportation of children. This requires not only vehicle safety, but also guidelines for the supervision of children in vehicles.

Agency policies and procedures for the safe transportation of children need to address the following issues:

1. Staff responsibility. Which agency staff are responsible for the transportation of residents? Who coordinates the scheduling of transportation? What are the specific responsibilities of the child care worker?

2. Agency vehicles. What agency vehicles are available for transportation? Are these vehicles designated for specific transportation purposes or assigned to specific groups within the agency? What are the procedures for obtaining an agency vehicle to transport children?

3. Vehicle safety and maintenance. What is the schedule for vehicle maintenance and safety? What agency staff are responsible for maintenance? What are the specific responsibilities of the child care worker in reporting maintenance problems and arranging for vehicle maintenance?

4. Purchase of gasoline and oil. What are agency procedures for the purchase of gas and oil?

5. Personal vehicles of staff. Are staff required or permitted to use personal vehicles for the transportation of children? If so, what provisions are made to see that the owner of the vehicle carries adequate liability insurance? What are the procedures to reimburse staff for mileage expenses?

6. Safety practices. The following safety practices should be detailed for all staff transporting residents:

   a. Loading and unloading. The Rules and Regulations of the Department of Public Welfare require that children be loaded and unloaded at the curb and only from the curb side of the vehicle.

   b. Seating. The Rules and Regulations further require that only the number of children and adults for whom there is comfortable seating space be transported in one vehicle. No child shall be permitted to stand in the vehicle when being transported. Floors and seats of the vehicle shall be kept clean and free from obstruction.[1]

   c. Agency guidelines. Does the agency provide further guidelines for the staff person responsible for direct supervision of children in vehicles?

   d. First Aid supplies. Are First Aid supplies available in agency vehicles?

   e. Transportation by non-agency staff. What are the policies of the agency with respect to agency residents riding in the vehicles of persons not employed by the agency?

   f. Driver's education and licensing of residents. What is agency policy about students enrolling in driver's education courses? May residents acquire a driver's license while in the care of this agency?

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[1] Indiana State Department of Public Welfare. Rules and Regulations - Regulation 3-367 - Transportation Equipment.

AGENCY FORMS

This section of the manual is reserved for the agency to insert a sample of all agency forms, so the child care worker may become acquainted with necessary forms.

RESOURCES FOR THE CHILD CARE WORKER

These selected readings should prove helpful to child care workers in residential care. They offer guidelines for care and address specific problems and issues the worker may encounter. This section may also serve as a guide in developing an agency library relevant to the child care worker.

Most of these materials can be located in local libraries or through interlibrary loan from universities. Others are available through bookstores. A few are obtainable from other sources; these are noted in individual listings.

Child Care Work

Adler, Jack. The Child Care Worker: Concepts, Tasks and Relationships. New York: Brunner/Mazel, Publishers, 1976.

While parts of this book tend to be overly theoretical others are quite relevant and practical for the child care worker. Chapter two offers a brief outline of normal developmental stages. Other areas of interest are discussions on problem behaviors such as lying, stealing and temper tantrums; on sexual behaviors, including homosexuality and masturbation; and on drug abuse.

Beker, Jerome, et al. Critical Incidents in Child Care: A Case Book for Child Care Workers. New York: Behavioral Publications, 1972.

This case book presents an excellent opportunity for the child care worker to examine potential situations that may be encountered in child care work. The cases are presented in an open-ended format so as to encourage the worker to think about and discuss possible actions and decisions.

Broten, Alton. Houseparents in Children's Institutions. Chapel Hill, N.C.: The University of North Carolina Press, 1962.

This discussion is directed specifically to the child care worker; it is useful to be read by individual workers or for an in-service training group. Section one examines the worker's job and her relationships with other staff, while other sections look at the child and the roles of the child care worker with the child. An effective discussion of training and discipline is offered along with a look at the children as a group and a discussion of group dynamics.

Burmeister, Eva. The Professional Houseparent. New York: Columbia University Press, 1960.

Another classic in the field, this book offers a practical discussion of the roles and functions of the child care worker. Subjects covered include meals and other daily routines, play, discipline, sex education, and religion. This is an excellent resource.

Burmeister, Eva. Tough Times and Tender Moments in Child Care Work. New York: Columbia University Press, 1967.

Written for child care workers by child care workers, this book gives a glimpse of life in various residential care centers. Burmeister has gathered this material and presented it in a most interesting and readable way. Issues addressed include groups, visiting, and the relationship between the child, parent, and child care worker.

Drisko, James. "Memo to Institution Staff: Physical Involvement with Children--A Therapeutic Intervention." Child Welfare, 55, No. 7 (July/August, 1976), 469-477.

Drisko establishes in this article that there are times when the use of physical restraint is necessary with children in care, although he emphasizes its use as a last resort. Physical involvement is defined and situations that may require physical involvement are identified. This article is a useful guideline for child care workers. Copies of this article are available on loan from the Indiana Association of Residential Child Care Agencies.

Foster, Genevieve, et al. Child Care Work with Emotionally Disturbed Children. Pittsburgh: University of Pittsburgh Press, 1972.

The information contained in this book is relevant and practical for training and orientation of new staff, as well as for the experienced child care worker. The worker's functions in basic daily care, play, group relations, and in individual relationships are discussed. Part four offers useful information on activity programming.

Group Child Care Consultants Services, University of North Carolina. Basic Course for Residential Child Care Workers. Chapel Hill, N.C., 1977.

This training course for child care workers provides information, skills and attitudes necessary to work with children in residential care. The course is divided into seven units, each with an instructor's and student's manual. The units are: (1) Developmental Planning--explores the child care worker's role in each step of planning; (2) Developmental Needs--provides information on patterns of growth and development in children; (3) Separation--considers the impact of separation on child and family; (4) Cottage--discusses organization and management of the living unit; (5) Discipline--discusses the role of discipline and refers to philosophies of behavior change; (6) Group--defines groups and discusses techniques for positive group development; (7) Job--considers the importance of the individual worker and emphasizes a need for self-awareness. Student

manuals are designed for self-learning, and each unit can be studied separately. This course is an invaluable training tool for child care workers in group training or for individual use.

Student manuals are available free of charge through the Indiana Association of Residential Child Care Agencies. Instructor's manuals may be purchased from: Group Child Care Consultants, School of Scoial Work, University of North Carolina, Chapel Hill, N.C., 27514.

Hirschback, Ernest. "Memo to Child Care Workers on Their Role in Group Homes." Child Welfare, 55 No. 10, (Dec. 76) 681-690.

Hirschback defines six roles of child care workers in group homes. They are: homemaker, surrogate parent, model for the children, part of treatment team, teacher, and home manager. The author also considers the necessary qualifications for child care workers. This article offers a clear definition of who and what a child care worker is in group homes. This article is available on loan from the Indiana Association of Residential Child Care Agencies.

Klein, Alan F. The Professional Child Care Worker: A Guide to Skills, Knowledge, Techniques, and Attitudes. New York: Association, 1975.

This book is designed as a text for child care workers. Each chapter, which can be read as an entity in itself, includes questions to help the reader review content and to stimulate thinking. The material is very practical and detailed, and theory is not emphasized.

Lambert, Paul. "Memo to Child Care Workers: Notes on the Management of Sex and Stealing." Child Welfare, 55, No. 5 (May, 1976) 329-334.

This article recognizes the problems which stealing and various sexual behaviors present in residential care. Lambert notes that there are many motivations behind sexual behaviors; he notes some of these motivations and makes suggestions for management of the behavior. Stealing has been defined as being of three types: compulsive, mischievous and malicious. Lambert explains each type with their accompanying motivations; he again makes suggestions for handling the behavior. Copies of this article are available on loan from the Indiana Association of Residential Child Care Agencies.

Lambert, Paul. The ABCs of Child Care Work in Residential Care. New York: Child Welfare League of America, 1977.

An excellent brief book, it covers in a few pages the essence of child care work in residential settings. Information is given on the basic fundamentals of child care; special problems in care, such as stealing and runaways; daily routines; and the relationships with families.

Littner, Ner. The Importance of the Natural Parents to the Child in Placement. U.S. Department of Health, Education and Welfare, Office of Child Development, Washington, D.C. DHEW Publication No. (OHD) 76-30027, 1973.

Littner discusses the significance of the child's natural parents on the child's life and the importance of continued contact throughout the period

the child is in care. Despite emotional upsets and increased behavior problems that may accompany family contacts, the child must have the contact in order to deal with the pain of separation and gradually come to see the family realistically. This article is helpful to the child care worker in gaining an understanding of the child's need to maintain family contact. Copies are available on loan from the Indiana Association of Residential Child Care Agencies.

Mayer, Morris F. A Guide for Child Care Workers. New York: Child Welfare League of America, 1968.

Although this guide for child care workers has been around for a long time, the material continues to be both relevant and practical, and served as a valuable resource in the preparation of this Model Manual. The early chapters discuss the individual child in interaction with the group. Others examine the routines of daily living, discipline, and play. Staff communication and cooperation and the training of child care workers are also addressed.

Redl, Fritz and Wineman, David. The Aggressive Child. New York: The Free Press, 1957.

This is a combination of two books: Children Who Hate and Controls From Within. Children Who Hate primarily provides a theoretical base on children and aggressive behavior; while Controls From Within offers practical treatment approaches. The authors have prepared a good resource for child care workers.

Redl, Fritz. When We Deal with Children. New York: The Free Press, 1966.

This important collection of articles is both theoretical and practical. Fritz Redl is recognized among the foremost pioneers in the area of professional child care. He introduced the "life-space interview," a technique for goal-directed discussion between child care worker and child of every day life events, as they take place. Redl discusses how the purposeful group living situation can become a "therapeutic mileu." Groups are explored in depth, considering the effects of the individual on the group and vice versa. Redl also emphasizes the importance of placing a child in a group most suited to meeting the child's needs. This book is useful, but Redl's use of professional jargon may make for slower reading.

Trieschman, Albert, Whittaker, James and Brendtro, Larry. The Other Twenty-Three Hours. Chicago: Aldine Publishing, 1969.

This classic is essential reading for the child care worker. The reading is practical and understandable and provides a good introduction to child care work. Major routines of the day in a residential care facility are explored; the therapeutic relationship is also considered. Chapter seven looks extensively at the stages of a temper tantrum and suggest methods of management.

Whittaker, James and Trieschman, Albert, editors. Children Away From Home. Chicago: Aldine Atherton, 1972.

This is a sourcebook of residential treatment, a collection of selected readings on group treatment, cottage life, therapeutic intervention, and staffing for residential treatment. Included is an interesting article on therapeutic recreation and several articles on work with the child's family. This is a useful resource for child care workers, administrators and other staff in residential child care.

Parenting Skills

Dinkmeyer, Don and McKay, Gary. Raising a Responsible Child: Practical Steps to Successful Family Relationships. New York: Simon and Schuster, 1973.

The authors believe there are four basic requirements for producing responsible children. They include: democratic, respectful relationships with children; verbal and nonverbal encouragement; discipline which uses natural and logical consequences rather than punishment and reward; and an understanding of human behavior. This book explains these four requirements, and uses case examples to illustrate their use.

Dreikurs, Rudolf and Soltz, Nicki. Children: The Challenge. New York: Duell, Sloan and Pearce, 1967.

This practical guide to parenting is also useful for child care workers. The emphasis is on understanding the child and on the use of natural and logical consequences rather than punishment and reward.

Dreikurs, Rudolf and Grey, Loren. Logical Consequences. New York: Meredith Press, 1968.

This is an excellent resource for understanding the concept and use of logical consequences in discipline. Clear definitions of conditions where logical consequences can be used are identified, as well as guidelines for use. Specific examples are provided. The last section is devoted to use of logical consequences with adolescents. The author emphasizes that this method of discipline is most successful in dealing with misbehaviors aimed at attention-getting.

Ginott, Haim. Between Parent and Child. New York: Avon Books, 1965.

Ginott stresses the importance of positive communication between parent and child. He discusses typical issues of parenting which are also applicable to child care work. Some issues which are included are: fostering responsibility and independence, jealousy, discipline, and anxiety in children.

Ginott, Haim. Between Parent and Teenager. New York: Avon Books, 1969.

This book offers insight for working with and encouraging teenagers in their development. Ginott recognizes adolescence as being a period of turmoil and rebellion. He offers suggestions for not only handling this difficult time, but also ways of responding which will be constructive for the teenager and adult. This book should be useful to the child care worker.

Lerman, Saf. Parent Awareness Training. New York: A & W Publishers, 1980.

Lerman wrote this book for parents, but the discussions are equally applicable to residential care. This book emphasizes using positive approaches with children, favoring a teaching as opposed to a punitive approach. Specific, everyday incidents are used to illustrate the methods of child rearing. Some of the topics addressed are building a positive self-image, dealing with death, and sexual identity. Despite the fact that many of the illustrations are about children under ten years, this book is still a useful guide to working with children of various ages.

Patterson, G. R. and Gullion, M. E. Living with Children: New Methods for Parents and Teachers. Champaign, Ill.: Research Press, 1968.

Behavior modification techniques for parents and teachers to use with children are presented in a clear, step-by-step manner, with many examples. This is a practical book for child care workers, learning to use rewards and time-out in a consistent manner to help children change specific problem behavior.

Thompson, Charles and Poppen, William. For Those Who Care: Ways of Relating to Youth. Columbus, Ohio: Charles C. Merrill Publishing Co., 1972.

Although not directed specifically to residential care workers, this book, nonetheless, contains useful material on working with adolescents. Chapter one, "Relating to Youth," is an interesting look at adolescents' needs using Maslow's hierarchy of needs as a framework. Also of interest to child care workers are chapters five and seven which discuss managing conflicts and techniques for behavior change.

Sexuality and Venereal Disease

Corsard, Maria and Korzeniowsky, Carole. STD: A Commonsense Guide. New York: St. Martin's Press, 1980.

The authors do a thorough job of defining sexually transmitted diseases. They discuss symptoms, treatment, and prevention. Also included is a useful glossary which defines medical terminology. This is a good resource for child care workers and residents.

Gordon, Sol. Facts about Sex. New York: The John Day Company, 1970.

A simple and highly readable introduction to sexuality, this book is recommended for early teens. It illustrates and discusses physical changes of the young adolescent, conception and birth processes, and briefly answers common questions asked by teens.

Johnson, Eric. Love and Sex in Plain Language. New Revised Edition. New York: J. B. Lippincote Company, 1973.

Johnson has produced an excellent resource for children and adolescents, ages ten and up. Issues he addresses includes: development of male and female sex organs; sexual intercourse; fertilization, pregnancy, and birth; homosexuality; masturbation; venereal disease; and contraception.

Johnson, Eric. V.D. New York: J. B. Lippincott Company, 1973.

Another good book by Johnson, this one is written specifically to inform adolescents about venereal disease. He defines venereal disease, how it is spread, and how it is treated.

McCary, James. Human Sexuality. New York: Nan Nostrand Reinhold Company, 1973.

This book is a good detailed discussion of the physiological, psychological and sociological factors of sexuality. It will provide a good knowledge base for child care workers.

McCoy, Kathy and Wibbelsman, Charles. The Teen Age Body Book. New York: Pocket Books, 1979.

This book is an excellent resource for child care workers and teenagers. The authors give straightforward answers to questions about sexuality and health. They address nearly any issue about which a teenager might inquire. Physical development of males and females, including a good section on menstruation,is illustrated and discussed. Chapter ten offers a thorough presentation on sexuality, including masturbation and homosexuality. Other topics presented are: changing feelings, health problems, diet, beauty, venereal disease, birth control, pregnancy, and parenthood. There is an excellent appendix, directing the reader to resources for help and information on various problems and issues.

Nourse, Alan. Menstruation: Just Plain Talk. New York: Franklin Watts, 1980.

Written for early adolescents, this book offers a good explanation of menstruation. This includes the physiological aspects, variations in menstrual periods, tension and cramps, and a good discussion on personal hygiene.

Pomeroy, Wardell. Boys and Sex. Delacorte Press, 1968.

Boys and their developing sexuality is the subject of this book. Pomeroy goes beyond the physical aspects of sexuality and emphasizes the social and emotional aspects. He discusses sexual behaviors ranging from pre-adolescent sex play to masturbation, from petting to intercourse, and includes a discussion on homosexuality. He also emphasizes the consequences of various sexual behaviors. This a good book for teenage boys.

Pomeroy, Wardell. Girls and Sex. Delacorte Press, 1969.

This book has been included even though some of Pomeroy's values about sexuality may be considered controversial. He is very frank about and accepting of adolescent sexuality, but does emphasize the consequences of sexual behavior. The book does a nice job of discussing the physical, psychological and social aspects of developing sexuality. It is written for the teenage girl.

Drugs

Cassel, Russell. Drug Abuse Education. North Zuincy, Massachusetts, 1971.

Cassel does a thorough job of presenting classes of drugs, stages of effect, types of drug addiction and education on drug abuse. He has also included an informative section of drug vocabulary. This book is a good resource for child care workers.

Land, Herman. What You Can Do about Drugs and Your Child. New York: Hart Publishing, 1969.

This book especially offers useful guidelines on how to identify drug use and communicate with youth about drugs. It also provides suggestions for intervention if a child is using or experimenting with drugs.

National Institute on Drug Abuse. Parents, Peers and Pot. DHHS Publication No. (ADM) 82-812. Rockville, Md.: the Institute, 1979.

This publication specifically addresses the use of marijuana by children and adolescents. It describes one strategy for working to prevent the use of marijuana by youth. Copies of this publication are available from: National Clearinghouse for Drug Abuse Information, Rm. 10A56, Parklawn Building, 5600 Fishers Lane, Rockville, Md. 20857. Other publications are also available by writing the above address.

Miles, Samuel. Learning About Alcohol. Washington, D.C.: American Association for Health, Physical Education, and Recreation, 1974.

A good resource book for education on alcohol, it is useful for child care workers and can be used as a guideline for educating children and adolescents. This book was written for teachers and schools, but the suggestions made are equally useful in residential care.

Recreation

Fluegelman, Andrew. More New Games. New York: Dolphin Books/Doubleday and Company, 1981.

This sequel to New Games offers more ingenious, delightful games to be used for all ages. The games focus on "participation, creativity, and community." The book is organized to offer games for low to high activity and for two players or more. This book can be purchased at local book stores.

Fluegelman, Andrew. The New Games Book. San Francisco: Headlands Press, 1976.

These games are designed for all ages and group sizes. Little equipment is used for play and the games encourage active participation with emphasis on having fun. Players are encouraged to be creative and come up with many variations of the games. The focus of the games is on developing trust and cooperation, rather than competing; on celebrating each participants abilities, rather than on comparing abilities. Child care workers will find this book valuable.

Orlick, Terry. The Cooperative Sports and Games Book. New York: Pantheon Books, 1978.

This innovative approach to play emphasizes cooperation and that there are no losers. The games have been selected to encourage acceptance of and sharing with others, and to facilitate positive learning experiences in children about themselves and others. These games are highly versatile and adaptable and require little equipment. This is an excellent aid for child care workers.

Orlick, Terry. The Second Cooperative Sports and Games Book New York: Pantheon Books, 1982.

The purpose of this book is to facilitate cooperative play for children. Activities are presented for use with ages two through adulthood and for indoor and outdoor play. This book should be available at libraries, through interlibrary loan, or through your bookstore.

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Mayer, M. F., Richman, L. H., and Balcerzak, E. A. Group Care of Children--Crossroads and Transitions. New York: Child Welfare League of America, 1977.

Navarre, E. L. Sexually Abused Children--Prevention, Protection and Care: A Handbook for Residential Child Care Facilities. Indianapolis: Indiana University School of Social Work--Residential Child Care Project, 1983.

Ohio Association of Child Caring Agencies. Guidelines for Protecting the Child in Residential Group Care. Columbus, OH, 1982.

Ruth, R. A., Snell, T. B., Tajalli, I. Q., and Navarre, E. L. The Care of Minority Children in Residential Facilities. Indianapolis: Indiana University School of Social Work--Residential Child Care Project, 1982.

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